Hon. Andrew Joyce  
Chairman  
Albany County Legislature  
112 State Street – Suite 710  
Albany, New York 12207  

Dear Mr. Joyce,

The Albany County Water Purification District (ACWPD) is requesting legislation action to designate the County as lead agency for State Environmental Quality Review (SEQR) on the Water Purification District’s Anaerobic Biosolids handling facility project. This project is a component of the District’s 2019-2023 Capital Plan with design engineering to be awarded in 2019.

The ACWPD and Saratoga County Sewer District (SCSD) are proposing to build, operate and maintain an anaerobic digestion facility that will be capable of digesting the biosolids from the two wastewater treatment plants owned and operated by the District and the biosolids from the Saratoga treatment plant. This facility would also be capable of accepting sludge from smaller communities and high strength organic waste in the form of food waste, fats oils and grease. When constructed, this facility will be owned, operated and maintained by both Districts equally. The project will be constructed on the District’s North plant property.

ACWPD and SCSD, both incinerated biosolids as a final form of disposal of biosolids. ACWPD maintains four multiple hearth incinerators while SCSD had one fluidized bed incinerator. This will allow for the decommissioning of five sewage sludge incinerators.

It was determined that SEQR Type 1 action is required in order to fulfill the requirements for Federal funding. As such, following resolution 625 of 2018, the county has taken the necessary steps to declare Lead Agency Status. Given that there has been no objection from involved and interested agencies, the County will proceed with the necessary environmental assessment as Lead Agency and make a determination as to the environmental impact of the project.

Very truly yours,

Timothy S. Murphy  
Executive Director

Cc: Dennis A. Feeney, Majority Leader  
Kevin Cannizzaro, Majority Counsel  
Frank Mauriello, Minority Leader  
Arnies Zilgme, Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Request to designate the County lead agency for SEQR as part of the Water Purification Districts Anaerobic Biosolids Facility project

Date: 2/12/19
Submitted By: Angelo Gaudio
Department: Water Purification District
Title: Project Developer
Phone: 518-447-1624
Department Rep.
Attending Meeting: Angelo Gaudio

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☐ Contract Authorization
☐ Countywide Services
☒ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☐ Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline: Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed) Click or tap to enter text.

Contract Terms/Conditions:

Party (Name/address):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee:
Click or tap here to enter text.
Scope of Services:
Click or tap here to enter text.

Bond Res. No.:
Date of Adoption:
Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:
Yes ☒ No ☐
If Mandated Cite Authority:
NYSDOC

Is there a Fiscal Impact:
Yes ☐ No ☒
Anticipated in Current Budget: Yes □ No □

County Budget Accounts:
Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)
Federal: Click or tap here to enter text.
State: Click or tap here to enter text.
County: 100
Local: Click or tap here to enter text.

Term
Term: (Start and end date) 2/25/2019-12/31/2022
Length of Contract: 46 months

Impact on Pending Litigation
Yes □ No ☒
If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:
Resolution/Law Number: Resolution 268 of 2018
Date of Adoption: Dec 17, 2018

Justification: (state briefly why legislative action is requested)
Requesting authorization to designate the County as Lead Agency for SEQR as part of the District’s Regional Biosolids Facility project
MEMORANDUM

TO: Tim Murphy
CC:
FROM: Laura DeGaetano
DATE: January 22, 2019
RE: Lead Agency Designation
SUBJECT: Regional Biosolids Project

The Department of Economic Development, Conservation and Planning commenced a review to determine SEQR Lead Agency status for the Regional Biosolids Project.

As the agency principally responsible for carrying out and approving the project, it was determined that it is appropriate for the County to seek Lead Agency status and conduct a coordinated review pursuant to 6 NYCRR Part 617.6 (b)(2)(3). A letter establishing Albany County’s intent to seek Lead Agency Status and a request for concurrence was sent to involved and interested agencies along with Part I of the SEQR Full Environmental Assessment Form and preliminary plans.

Following the required 30-day period for involved and interested agencies to comment on the county’s intent to serve as Lead Agency, no comments were received opposing the proposed Lead Agency Status. NYS Department of Environmental Conservation responded with information regarding potential permits and oversight within their jurisdiction related to the project.

After establishing lead agency status, the County must take all necessary steps to conduct a review and determine the significance of the action in accordance with NYCRR Part 6 section 617.7 and must immediately prepare, file, and publish the determination and provide written notice of its determination of significance to the applicant and all identified involved agencies.
December 20, 2018

Albany County Legislature
Hon. Andrew Joyce, Chairman
112 State St. Room 710
Albany, NY 12207

Dear Interested/Involved Party:

The purpose of this letter is to initiate the review process in compliance with State Environmental Quality Review (SEQR) for a project to construct a Biosolids Handling Facility at the Albany County Water Purification District (ACWPD) North Plant located at 1 Canal Road South in Menands, New York.

The ACWPD and Saratoga County Sewer District (SCSD) are proposing to build, operate and maintain an anaerobic digestion facility that will be capable of digesting the biosolids from the two wastewater treatment plants owned and operated by the District and the biosolids from the Saratoga treatment plant. This facility would also be capable of accepting sludge from smaller communities and high strength organic waste in the form of food waste, fats oils and grease. When constructed, this facility will be owned, operated and maintained by both Districts equally. The project will be constructed on the District’s North plant property.

The county has determined that:
- The proposed action is subject to SEQR
- The action is classified as a Type I action pursuant to 6 NYCRR Part 617.4 (9)
- The action will involve multiple agencies for funding, permits, and approvals

Enclosed please find Part 1 of the SEQR Full Environmental Assessment Form along with preliminary plans, for your review and consideration. At this time, we ask that you confirm your jurisdiction in this action and provide any preliminary feedback on issues of concern that you believe should be evaluated.

It is the intent of the Albany County Legislature to assume Lead Agency status under SEQR pursuant to 6 NYCRR Part 617.6. Please note your concurrence with this Lead Agency request by signing below and returning a copy to Laura DeGaetano at the address above. We ask that you respond by January 20, 2019 (30 days from the date of this letter) in compliance with the SEQR timeline.

If you have any questions regarding this letter or the project in general, please contact Timothy S. Murphy, Executive Director of the Albany County Water Purification District at 518-447-1611.

I concur with the Lead Agency request:

Agency: ____________________________
Name: ______________________________
Title: ______________________________
Signature: __________________________
List of Involved or Interested Agencies

Albany County Department of Health
Attn: Tom Brady
175 Green St.
Albany, NY 12202

Albany County Executive
Hon. Daniel P. McCoy
112 State St. Room 825
Albany, NY 12207

Albany County Legislature
Hon. Andrew Joyce, Chairman
112 State St. Room 710
Albany, NY 12207

City of Albany Department of Planning and Development
Attn: Chris Spencer
200 Henry Johnson Blvd
First Floor - Suite #3
Albany, NY 12210

Environmental Facilities Corp.
Attn: Bill Brizzell
625 Broadway # 7
Albany, NY 12207

New York State Department of Environmental Conservation
Attn: Nancy M. Baker
Regional Permit Administrator, Division of Environmental Permits
1130 North Westcott Rd, Schenectady, NY 12306

New York State Department of State
Attn: Matthew Maraglio
Office of Planning, Development & Community Infrastructure
99 Washington Avenue, Suite 1010, Albany, NY 12231

New York State Office of Parks, Recreation and Historic Preservation
Attn: Rose Harvey
Peebles Island State Park
P.O. Box 189
Waterford, NY 12188
Saratoga County Sewer District #1
Attn: Dan Rourke, P.E. - Executive Director
P.O. Box 550
Mechanicville NY 12118

Town of Halfmoon
Attn: Kevin Tollisen
2 Halfmoon Plaza
Clifton Park, NY 12065

Town of Saratoga
Attn: Hon. Thomas N. Wood III
12 Spring St.
Schuylerville, NY 12871

U.S. Army Corps of Engineers
Attn: Andrew Dangler
Watervliet Field Office
1 Buffington St.
Watervliet, NY 12189

Village of Menands
Attn: Hon. Megan Grenier
280 Broadway
Menands, NY 12204
NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Environmental Permits, Region 4
1130 North Westcott Road, Schenectady, NY 12306-2014
P: (518) 357-2069 F: (518) 357-2460
www.dec.ny.gov

December 27, 2018

Timothy S. Murphy, Executive Director
Albany County Purification District
112 State Street, Room 800
Albany, NY 12207-2021

RE: LEAD AGENCY COORDINATION RESPONSE
Biosolids Handling Facility
North Plant, 1 Canal Road
Menands, Albany County

Dear Mr. Murphy:

This letter responds to your correspondence of December 20, 2018, regarding lead agency coordination for the project referenced herein, under Article 8 (State Environmental Quality Review - SEQR) of the Environmental Conservation Law and 6 NYCRR Part 617. The New York State Department of Environmental Conservation ("DEC" or "Department") has the following interest in this project:

Name of Action: Biosolids Handling Facility
DEC Contact Person: Angelika Stewart
SEQR Classification: Type I

DEC Position: Based on the information provided:

☑ DEC has no objection to your agency assuming lead agency status for this action.
☐ DEC wishes to assume lead agency status for this action.
☐ DEC needs additional information in order to respond (see comments).
☐ DEC cannot be lead agency because it has no jurisdiction in this action.

Possible DEC Permits:

- **Article 24 Freshwater Wetlands Permit** — Freshwater Wetland (ID TS-9) is located within or immediately adjacent to the project area. An Article 24 Freshwater Wetlands Permit is required for any physical disturbance within the boundaries of the wetland or within the regulated 100-feet adjacent area. (*Please note that the jurisdictional maps are meant to provide approximate sizes and locations of resources. Actual field conditions may vary from those depicted on the maps.*)
- **Section 401 Water Quality Certification** — If this project will impact federally-regulated wetlands or waterbodies, which require a Section 404 Permit (Individual or Nationwide Permit) from the U.S. Army Corps of Engineers, a Section 401 Water Quality Certification may be required from the Department.
• **State Pollutant Discharge Elimination System (SPDES) Wastewater Permit** – A SPDES permit is required for any facility which has a surface discharge or discharges more than 1,000 gallons per day of sewage-wastewater into ground waters of the state. The existing SPDES permit for this facility will need to be modified.

• **SPDES General Permit for Stormwater Discharges from Construction Activity** – if this project will disturb one acre of land or more, the applicant must comply with the State Pollutant Discharge Elimination System (SPDES) Phase II regulations for Stormwater Discharges Associated with Construction Activities.

**Additional Comments:**

The project appears to be located within an area of potential historical or archeological significance. If approvals/permits are ultimately needed from this Department, we may need to consult with the New York State Office of Parks, Recreation, and Historic Preservation (OPRHP) in order to better evaluate this project’s impact on these resources. You may wish to inform the applicant/project sponsor of this potential requirement. To initiate consultation with OPRHP, please visit their project submission website at [https://pris.parks.ny.gov](https://pris.parks.ny.gov). Please add Angelika Stewart at [angellka.stewart@dec.ny.gov](mailto:angellka.stewart@dec.ny.gov) to the list of contacts for your project.

The project is also located in an Environmental Justice community, and therefore, a Public Participation Plan must be prepared and initiated to comply with the Department’s Environmental Justice policy. Information regarding environmental justice can be found on our website at: [www.dec.ny.gov/public/333.html](http://www.dec.ny.gov/public/333.html).

Enclosed is a copy of the Department’s jurisdictional map for your reference. Please note that the map is intended to provide an idea as to the approximate size and location of resources; actual field conditions may vary from those depicted on the map.

Please feel free to contact Angelika Stewart by telephone at (518) 357-2171 or by e-mail at [angellka.stewart@dec.ny.gov](mailto:angellka.stewart@dec.ny.gov) if you have any questions.

Sincerely,

Nancy M. Baker
Regional Permit Administrator

Enclosure: Jurisdictional Map
cc: File
Instructions for Completing Part I

Part I is to be completed by the applicant or project sponsor. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification.

Complete Part I based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the project sponsor to verify that the information contained in Part I is accurate and complete.

### A. Project and Sponsor Information

<table>
<thead>
<tr>
<th>Name of Action or Project:</th>
<th>Regional Biosolids Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Location (describe, and attach a general location map):</td>
<td>North Plain: 1 Canal Road South, Albany; South Plain: Church Street, Albany, SCSD: Hudson River Road, Halfmoon (See location maps attached)</td>
</tr>
<tr>
<td>Brief Description of Proposed Action (include purpose or need):</td>
<td>Project Description Attached</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Applicant/Sponsor:</th>
<th>Timothy S. Murphy, Albany County Water Purification District</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone:</td>
<td>518-447-1611</td>
</tr>
<tr>
<td>E-Mail:</td>
<td><a href="mailto:tim.murphy@albanycounty.gov">tim.murphy@albanycounty.gov</a></td>
</tr>
<tr>
<td>Address:</td>
<td>1 Canal Road South</td>
</tr>
<tr>
<td>City/PO:</td>
<td>Albany</td>
</tr>
<tr>
<td>State:</td>
<td>New York</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>12204</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Contact (if not same as sponsor; give name and title/role):</th>
<th>Angelo Gaudio, Albany County Water Purification District</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone:</td>
<td>518-447-1611</td>
</tr>
<tr>
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<tr>
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<td>New York</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>12204</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Property Owner (if not same as sponsor):</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone:</td>
<td></td>
</tr>
<tr>
<td>E-Mail:</td>
<td><a href="mailto:angelo.gaudio@albanycounty.gov">angelo.gaudio@albanycounty.gov</a></td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City/PO:</td>
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<tr>
<td>State:</td>
<td></td>
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<tr>
<td>Zip Code:</td>
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</tbody>
</table>

Page 1 of 13
B. Government Approvals

<table>
<thead>
<tr>
<th>Government Entity</th>
<th>If Yes: Identify Agency and Approval(s) Required</th>
<th>Application Date (Actual or projected)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. City Council, Town Board, or Village Board of Trustees</td>
<td>☑Yes ☐No City of Albany, Town of Halfmoon, Village of Menands</td>
<td>December 2018</td>
</tr>
<tr>
<td>b. City, Town or Village Planning Board or Commission</td>
<td>☐Yes ☑No</td>
<td></td>
</tr>
<tr>
<td>c. City Council, Town or Village Zoning Board of Appeals</td>
<td>☐Yes ☑No</td>
<td></td>
</tr>
<tr>
<td>d. Other local agencies</td>
<td>☐Yes ☑No</td>
<td></td>
</tr>
<tr>
<td>e. County agencies</td>
<td>☑Yes ☐No Albany Co. Executive and Legislature, Saratoga Co. Board of Supervisors (funding), SCSD, ACHD</td>
<td>December 2018</td>
</tr>
<tr>
<td>f. Regional agencies</td>
<td>☐Yes ☑No</td>
<td></td>
</tr>
<tr>
<td>g. State agencies</td>
<td>☑Yes ☐No EFC(funding), NYSDEC(SPDES, wetlands), NYSDOS(Consist. review) NYSORHP(His. Arc.)</td>
<td>December 2018</td>
</tr>
<tr>
<td>h. Federal agencies</td>
<td>☑Yes ☐No U.S. Army Corps (wetlands)</td>
<td>December 2018</td>
</tr>
<tr>
<td>i. Coastal Resources.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Is the project site within a Coastal Area, or the waterfront area of a Designated Inland Waterway?</td>
<td>☑Yes ☐No Albany locations only</td>
<td></td>
</tr>
<tr>
<td>ii. Is the project site located in a community with an approved Local Waterfront Revitalization Program?</td>
<td>☐Yes ☑No</td>
<td></td>
</tr>
<tr>
<td>iii. Is the project site within a Coastal Erosion Hazard Area?</td>
<td>☐Yes ☑No</td>
<td></td>
</tr>
</tbody>
</table>

C. Planning and Zoning

C.1. Planning and zoning actions.

Will administrative or legislative adoption, or amendment of a plan, local law, ordinance, rule or regulation be the only approval(s) which must be granted to enable the proposed action to proceed? ☐Yes ☑No

- If Yes, complete sections C, F and G.
- If No, proceed to question C.2 and complete all remaining sections and questions in Part I

C.2. Adopted land use plans.

a. Do any municipally-adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? ☑Yes ☐No

If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? ☐Yes ☑No

b. Is the site of the proposed action within any local or regional special planning district (for example: Greenway Brownfield Opportunity Area (BOA); designated State or Federal heritage area; watershed management plan; or other?) ☑Yes ☐No

If Yes, identify the plan(s):
- NYS Heritage Areas: Mohawk Valley Heritage Corridor
- Village of Menands Broadway Corridor Economic Development District, 2009

o. Is the proposed action located wholly or partially within an area listed in an adopted municipal open space plan, ☐Yes ☑No or an adopted municipal farmland protection plan?

If Yes, identify the plan(s):
C.3. Zoning

a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance?
   □ Yes □ No
   If Yes, what is the zoning classification(s) including any applicable overlay district?
   North Plant - Heavy Industrial (Menands) South Plant - Heavy Industrial (Albany), Saratoga County Sewer District - Industrial (Halfmoon)

b. Is the use permitted or allowed by a special or conditional use permit?
   □ Yes □ No

c. Is a zoning change requested as part of the proposed action?
   If Yes,
   i. What is the proposed new zoning for the site?

C.4. Existing community services.

a. In what school district is the project site located?
   North Plant - Menands School District, South Plant - City of Albany Schools, and Saratoga County Wastewater Treatment Plant - Mechanicville School District

b. What police or other public protection forces serve the project site?
   Village of Menands, City of Albany, Saratoga County Sheriff

c. Which fire protection and emergency medical services serve the project site?
   Menands Fire Company #1, Albany Fire Department, Town of Halfmoon Forest Fire District

d. What parks serve the project site?
   North Plant - Hudson-Mohawk Bike Trail

D. Project Details

D.1. Proposed and Potential Development

a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, include all components)? Primarily industrial at all three sites. Areas adjacent to North Plant and South Plant are more densely developed than Saratoga County Sewer District Site.

b. a. Total acreage of the site of the proposed action?
   b. Total acreage to be physically disturbed?
   c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor?
      94.96 acres

   +/-.5 acres 5.5 North Plant, 0.5 South Plant, 0.5 SCD

   94.96 acres

c. Is the proposed action an expansion of an existing project or use?
   □ Yes □ No
   i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, housing units, square feet)? % 25%

   Units: 85,000 SF new structures

d. Is the proposed action a subdivision, or does it include a subdivision?
   □ Yes □ No
   i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types)

   ii. Is a cluster/conservation layout proposed?

   Yes □ No

   iii. Number of lots proposed?

   □ Yes □ No

   iv. Minimum and maximum proposed lot sizes? Minimum _______ Maximum _______

e. Will proposed action be constructed in multiple phases?
   □ Yes □ No
   i. If No, anticipated period of construction:

   ii. If Yes:
      • Total number of phases anticipated
      • Anticipated commencement date of phase 1 (including demolition) ______ month ______ year
      • Anticipated completion date of final phase ______ month ______ year
      • Generally describe connections or relationships among phases, including any contingencies where progress of one phase may determine timing or duration of future phases:
f. Does the project include new residential uses?  
If Yes, show numbers of units proposed.  
<table>
<thead>
<tr>
<th>One Family</th>
<th>Two Family</th>
<th>Three Family</th>
<th>Multi Family (four or more)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Phase</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>At completion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>of all phases</td>
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</tbody>
</table>

☐ Yes ☐ No

g. Does the proposed action include new non-residential construction (including expansions)?  
If Yes,  
1. Total number of structures  
2. Dimensions (in feet) of largest proposed structure:  
   - Height:  
   - Width:  
   - Length:  
3. Approximate extent of building space to be heated or cooled:  
   - Square feet

h. Does the proposed action include construction or other activities that will result in the impoundment of any liquids, such as creation of a water supply, reservoir, pond, lake, waste lagoon or other storage?  
If Yes,  
1. Purpose of the impoundment:  
2. If a water impoundment, the principal source of the water:  
   - Ground water  
   - Surface water storage  
   - Other specify:

III. If other than water, identify the type of impounded/contained liquids and their source.

iv. Approximate size of the proposed impoundment. 
   - Volume:  
   - Surface area:  
   - Acres

v. Dimensions of the proposed dam or impounding structure:  
   - Height:  
   - Length:  

vi. Construction method/materials for the proposed dam or impounding structure (e.g., earth fill, rock, wood, concrete):

D.2. Project Operations

a. Does the proposed action include any excavation, mining, or dredging, during construction, operations, or both?  
   (Not including general site preparation, grading or installation of utilities or foundations where all excavated materials will remain onsite)  
☐ Yes ☐ No

If Yes:  
1. What is the purpose of the excavation or dredging?  
   - Prepare lagoon area for construction of dike/structure

2. How much material (including rock, earth, sediments, etc.) is proposed to be removed from the site?  
   - Volume (specify tons or cubic yards):  
   - Over what duration of time?

iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them.  
   - Materials from lagoons will be emptied and cleaned as part of regular maintenance activities. These materials will be disposed of in accordance with current practices and regulations.

iv. Will there be onsite dewatering or processing of excavated materials?  
   - If yes, describe.  
   - Materials from the ash lagoons will be dried by draining the lagoons.

v. What is the total area to be dredged or excavated?  
   - +/-2.4 acres

vi. What is the maximum area to be worked at any one time?  
   - +/-1.3 acres

vii. What would be the maximum depth of excavation or dredging?  
   - +/-3 feet

viii. Will the excavation require blasting?  
   - ☐ Yes ☐ No

ix. Summarize site reclamation goals and plan:  
   - Site reclamation goals are to properly prepare the lagoon area to support the construction of the dike/structure and other facilities.

b. Would the proposed action cause or result in alteration of, increase or decrease in size of, or encroachment into any existing wetland, waterbody, shoreline, beach or adjacent area?  
☐ Yes ☐ No

If Yes:  
1. Identify the wetland or waterbody which would be affected (by name, water index number, wetland map number or geographic description):  
   - NYSDEC Wetland TS-9
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>iii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placement of structures, or alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in square feet or acres. Field work is required to determine if there will be impacts to NYSDEC Wetland TS-9 immediately adjacent to northern boundary of the project area. This will be completed prior to any construction activities.</td>
<td></td>
</tr>
<tr>
<td>iv. Will proposed action cause or result in disturbance to bottom sediments?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If Yes, describe:</td>
<td></td>
</tr>
<tr>
<td>iv. Will proposed action cause or result in the destruction or removal of aquatic vegetation?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If Yes:</td>
<td></td>
</tr>
<tr>
<td>• acres of aquatic vegetation proposed to be removed:</td>
<td></td>
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<tr>
<td>• expected acreage of aquatic vegetation remaining after project completion:</td>
<td></td>
</tr>
<tr>
<td>• purpose of proposed removal (e.g. beach clearing, invasive species control, boat access):</td>
<td></td>
</tr>
<tr>
<td>• proposed method of plant removal:</td>
<td></td>
</tr>
<tr>
<td>• if chemical/herbicide treatment will be used, specify product(s):</td>
<td></td>
</tr>
<tr>
<td>v. Describe any proposed reclamation/mitigation following disturbance:</td>
<td></td>
</tr>
<tr>
<td>c. Will the proposed action use, or create a new demand for water?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If Yes:</td>
<td></td>
</tr>
<tr>
<td>i. Total anticipated water usage/demand per day:</td>
<td></td>
</tr>
<tr>
<td>ii. Will the proposed action obtain water from an existing public water supply?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If Yes:</td>
<td></td>
</tr>
<tr>
<td>• Name of district or service area:</td>
<td></td>
</tr>
<tr>
<td>• Does the existing public water supply have capacity to serve the proposal?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>• Is the project site in the existing district?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>• Is expansion of the district needed?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>• Do existing lines serve the project site?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>iii. Will line extension within an existing district be necessary to supply the project?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If Yes:</td>
<td></td>
</tr>
<tr>
<td>• Describe extensions or capacity expansions proposed to serve this project:</td>
<td></td>
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<tr>
<td>Source(s) of supply for the district:</td>
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</tr>
<tr>
<td>iv. Is a new water supply district or service area proposed to be formed to serve the project site?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If Yes:</td>
<td></td>
</tr>
<tr>
<td>• Applicant/sponsor for new district:</td>
<td></td>
</tr>
<tr>
<td>• Date application submitted or anticipated:</td>
<td></td>
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<tr>
<td>• Proposed source(s) of supply for new district:</td>
<td></td>
</tr>
<tr>
<td>v. If a public water supply will not be used, describe plans to provide water supply for the project:</td>
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<tr>
<td>vi. If water supply will be from wells (public or private), maximum pumping capacity: gallons/minute.</td>
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<tr>
<td>d. Will the proposed action generate liquid wastes?</td>
<td>Yes/No</td>
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<tr>
<td>If Yes:</td>
<td></td>
</tr>
<tr>
<td>i. Total anticipated liquid waste generation per day:</td>
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<tr>
<td>ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all components and approximate volumes or proportions of each):</td>
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<tr>
<td>iii. Will the proposed action use any existing public wastewater treatment facilities?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>If Yes:</td>
<td></td>
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<tr>
<td>• Name of wastewater treatment plant to be used: North Plant</td>
<td></td>
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<tr>
<td>• Name of district: Albany County Water Purification District</td>
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<tr>
<td>• Does the existing wastewater treatment plant have capacity to serve the project?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>• Is the project site in the existing district?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>• Is expansion of the district needed?</td>
<td>Yes/No</td>
</tr>
</tbody>
</table>
iv. Will a new wastewater (sewage) treatment district be formed to serve the project site?
   If Yes:
   - Applicant/sponsor for new district:
   - Date application submitted or anticipated:
   - What is the receiving water for the wastewater discharge?

v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including specifying proposed receiving water (name and classification if surface discharge, or describe subsurface disposal plans):

vi. Describe any plans or designs to capture, recycle or reuse liquid waste:

- Will the proposed action disturb more than one acre and create stormwater runoff, either from new point sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point source (i.e. sheet flow) during construction or post construction?
   If Yes:
   i. How much impervious surface will the project create in relation to total size of project parcel?
      ______ Square feet or ______ acres (impervious surface) + total additional impervious surface - all three sites combined
      ______ Square feet or ______ acres (parcel size) + total acreage - all three sites
   ii. Describe types of new point sources. Runoff from expanded impervious surfaces from asphalt, buildings and covered tanks.

iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent properties, groundwater, on-site surface water or off-site surface waters)
   Stormwater will be managed in accordance with an approved SWPPP in accordance with New York State standards.
   - If to surface waters, identify receiving water bodies or wetlands:

iv. Does proposed plan minimize impervious surfaces, use pervious materials or collect and re-use stormwater?

f. Does the proposed plan include, or will it use on-site, one or more sources of air emissions, including fuel combustion, waste incineration, or other processes or operations?
   If Yes, Identify:
   i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles)
   Delivery vehicles
   ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers)
   Impactors, thermal boilers, combined heat and power and wastewater tanks.
   iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation)
   Thermal boilers, combined heat and power, biogas flares and wastewater tanks.

- Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, or Federal Clean Air Act Title IV or Title V Permit?

If Yes:
   i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet ambient air quality standards for all or some parts of the year)
   - Yes

ii. In addition to emissions as calculated in the application, the project will generate:
   - 83,456 Tons/year (short tons) of Carbon Dioxide (CO₂)
   - 100 Tons/year (short tons) of Nitrous Oxide (N₂O)
   - 0 Tons/year (short tons) of Perfluorocarbons (PFCs)
   - 0 Tons/year (short tons) of Sulfur Hexafluoride (SF₆)
   - 0 Tons/year (short tons) of Carbon Dioxide equivalent of Hydrofluorocarbons (HFCs)
   - 20 Tons/year (short tons) of Hazardous Air Pollutants (HAPs)
h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)?
   If Yes:
   i. Estimate methane generation in tons/year (metric): +2.570
   ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to generate heat or electricity, flaring): Biogas will be stored at low pressures, treated and used as fuel for thermal boilers or CHP systems where waste heat will be recovered and used to heat digesters and an existing CRC turbine. Excess biogas will be flared.

i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations?
   If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust):

j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services?
   If Yes:
   i. When is the peak traffic expected (Check all that apply): ☑ Morning ☐ Evening ☐ Weekend
   ii. For commercial activities only, projected number of semi-trailer truck trips/day: 5 additional
   iii. Parking spaces: Existing □ Proposed ☑ none Net increase/decrease
   iv. Does the proposed action include any shared use parking?
   v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe:
      Yes, loop road will be created reduce truck backing up requirements Improving safety and also for staging of trucks and multiple of loading simultaneously, thereby improving traffic. Only one liquid sludge truck can be off loaded each time currently, and up to four trucks can be off loaded in the future.

vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site?
   vii. Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles?
   viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes?

k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy?
   If Yes:
   i. Estimate annual electricity demand during operation of the proposed action:
   ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other):
   iii. Will the proposed action require a new, or an upgrade to, an existing substation?

l. Hours of operation. Answer all items which apply.
   i. During Construction:
      • Monday - Friday: 6 am to 6 pm
      • Saturday: 6 am to 6 pm
      • Sunday: 6 am to 6 pm
      • Holidays: 6 am to 6 pm
   ii. During Operations:
      • Monday - Friday: 24 hours per day
      • Saturday: 24 hours per day
      • Sunday: 24 hours per day
      • Holidays: 24 hours per day
m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both?  
☑ Yes ☐ No  
If yes:  
   i. Provide details including sources, time of day and duration: 
   Typical construction activities will exceed normal ambient noise levels during construction. No new sources of noise will be generated during operation.
   ii. Will proposed action remove existing natural barriers that could act as a noise barrier or screen?  
☐ Yes ☐ No  
   Describe: 

n. Will the proposed action have outdoor lighting?  
☑ Yes ☐ No  
If yes:  
   i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures: 
   Several small facility flood lights with no off site impact. Fixtures will be shielded to direct light downward. Location is well within the facility and will not be visible off property.
   ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen?  
☐ Yes ☐ No  
   Describe: 

o. Does the proposed action have the potential to produce odors for more than one hour per day?  
☑ Yes ☐ No  
If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures:  
Biosolids and municipal sludge have the potential to produce odors. Potential fugitive odors will be mitigated by odor control equipment for sludge handling and receiving facilities.

p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage?  
☑ Yes ☐ No  
If Yes:  
   i. Product(s) to be stored  
   ii. Volume(s) ___ per unit time ___ (e.g., month, year)  
   iii. Generally describe proposed storage facilities:  

q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation?  
☑ Yes ☐ No  
If Yes:  
   i. Describe proposed treatment(s):  

ii. Will the proposed action use Integrated Pest Management Practices?  
☑ Yes ☐ No  

r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)?  
☑ Yes ☐ No  
If Yes:  
   i. Describe any solid waste(s) to be generated during construction or operation of the facility:  
      - Construction: ___ 32 yards tons per ___ total (unit of time)  
      - Operation: ___ as per permit ___ tons per ___ (unit of time)  
   ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste:  
      - Construction:  
      - Operation:  
   iii. Proposed disposal methods/facilities for solid waste generated on-site:  
      - Construction:  
      - Operation: Class A or B biosolids will be hauled from the site and land applied in accordance with US EPA Part 503 Regulations and NYS Part 560 Regulations.
s. Does the proposed action include construction or modification of a solid waste management facility? □ Yes □ No

If Yes:

i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): Municipal wastewater sludge cake

ii. Anticipated rate of disposal/processing:
   • 640 Tons/month, if transfer or other non-combustion/thermal treatment, or
   • 0.4 Tons/hour, if combustion or thermal treatment

iii. If landfill, anticipated site life: NA ____________ years

f. Will proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous waste?

□ Yes □ No

If Yes:

i. Name(s) of all hazardous wastes or constituents to be generated, handled or managed at facility:

ii. Generally describe processes or activities involving hazardous wastes or constituents:

iii. Specify amount to be handled or generated _______ tons/month

iv. Describe any proposals for on-site minimization, recycling or reuse of hazardous constituents:

v. Will any hazardous wastes be disposed at an existing offsite hazardous waste facility?

□ Yes □ No

If Yes: provide name and location of facility:

If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility:

E. Site and Setting of Proposed Action

E.1. Land uses on and surrounding the project site

a. Existing land uses.

i. Check all uses that occur on, adjoining and near the project site.

□ Urban □ Industrial □ Commercial □ Residential (suburban) □ Rural (non-farm)
□ Forest □ Agriculture □ Aquatic □ Other (specify):

ii. If mix of uses, generally describe:

b. Land uses and covertypes on the project site.

*See additional information (Section F) for South Plant and SCSD sites.

<table>
<thead>
<tr>
<th>Land use or Covertype</th>
<th>Current Acreage</th>
<th>Acreage After Project Completion</th>
<th>Change (Acres +/-)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roads, buildings, and other paved or impervious surfaces</td>
<td>21.5</td>
<td>22.3</td>
<td>+.8</td>
</tr>
<tr>
<td>Forested</td>
<td>2.0</td>
<td>2.0</td>
<td></td>
</tr>
<tr>
<td>Meadow, grasslands or brushlands (non-agricultural, including abandoned agricultural)</td>
<td>2.0* (grass/lawn 1.5)</td>
<td>3.6</td>
<td>+1.6</td>
</tr>
<tr>
<td>Agricultural</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>(includes active orchards, field, greenhouse etc.)</td>
<td></td>
<td></td>
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<tr>
<td>Surface water features (lakes, ponds, streams, rivers, etc.)</td>
<td>0.5</td>
<td>0.5</td>
<td>0</td>
</tr>
<tr>
<td>Wetlands (freshwater or tidal)</td>
<td>0.2</td>
<td>0.2</td>
<td>0</td>
</tr>
<tr>
<td>Non-vegetated (bare rock, earth or fill)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other Describe: settling lagoons</td>
<td>2.4</td>
<td>0</td>
<td>-2.4</td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>-------------------------------------------------------------------------</td>
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<tr>
<td>o. Is the project site presently used by members of the community for</td>
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<tr>
<td>public recreation?</td>
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<tr>
<td>i. If Yes: explain:</td>
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<td>d. Are there any facilities serving children, the elderly, people with</td>
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<td>disabilities (e.g., schools, hospitals, licensed day care centers,</td>
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<tr>
<td>or group homes) within 1500 feet of the project site?</td>
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<tr>
<td>If Yes,</td>
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<tr>
<td>i. Identify Facilities:</td>
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<tr>
<td>e. Does the project site contain an existing dam?</td>
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<tr>
<td>If Yes:</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>i. Dimensions of the dam and impoundment:</td>
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<td></td>
<td></td>
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<tr>
<td>• Dam height:</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>• Dam length:</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>• Surface area:</td>
<td></td>
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<td></td>
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<tr>
<td>• Volume impounded:</td>
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<td></td>
<td></td>
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<tr>
<td>gallons OR acre-feet</td>
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<td></td>
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<tr>
<td>ii. Dam's existing hazard classification:</td>
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<tr>
<td>iii. Provide date and summarize results of last inspection:</td>
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<tr>
<td>f. Has the project site ever been used as a municipal, commercial or</td>
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<tr>
<td>industrial solid waste management facility, or does the project site</td>
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<tr>
<td>adjoining property which is now, or was at one time, used as a solid</td>
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<tr>
<td>waste management facility?</td>
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<tr>
<td>If Yes:</td>
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<tr>
<td>i. Has the facility been formally closed?</td>
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<tr>
<td>• If yes, cite sources/documentation: institutional knowledge</td>
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<tr>
<td>ii. Describe the location of the project site relative to the</td>
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<tr>
<td>boundaries of the solid waste management facility:</td>
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<tr>
<td>Albany North Plant - Adjacent property has a closed landfill and</td>
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<tr>
<td>active composting facility owned by the City of Albany. SCSD Plant</td>
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<tr>
<td>has a closed landfill.</td>
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<tr>
<td>iii. Describe any development constraints due to the prior solid waste</td>
<td></td>
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<td></td>
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<tr>
<td>activities:</td>
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<tr>
<td>None</td>
<td></td>
<td></td>
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<tr>
<td>g. Have hazardous wastes been generated, treated and/or disposed of</td>
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<tr>
<td>at the site, or does the project site adjoining property which is</td>
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<tr>
<td>now or was at one time used to commercially treat, store and/or</td>
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<tr>
<td>dispose of hazardous waste?</td>
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<tr>
<td>If Yes:</td>
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<tr>
<td>l. Describe waste(s) handled and waste management activities,</td>
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<td>including approximate time when activities occurred:</td>
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<td>h. Potential contamination history. Has there been a reported spill at</td>
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<tr>
<td>the proposed project site, or have any remedial actions been</td>
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<tr>
<td>conducted at or adjacent to the proposed site?</td>
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<tr>
<td>If Yes:</td>
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<tr>
<td>i. Is any portion of the site listed on the NYSDEC Spills Incidents</td>
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<tr>
<td>database or Environmental Site Remediation database? Check all that</td>
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<tr>
<td>apply:</td>
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<tr>
<td>□ Yes - Spills Incidents database</td>
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<tr>
<td>□ Yes - Environmental Site Remediation database</td>
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<td>□ Neither database</td>
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<tr>
<td>Provide DEC ID number(s):</td>
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<tr>
<td>ii. If site has been subject of RCRA corrective activities, describe</td>
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<tr>
<td>control measures:</td>
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<tr>
<td>iii. Is the project within 2000 feet of any site in the NYSDEC</td>
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<tr>
<td>Environmental Site Remediation database?</td>
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<tr>
<td>If Yes, provide DEC ID number(s):</td>
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<tr>
<td>546391</td>
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<tr>
<td>iv. If yes to (i), (ii) or (iii) above, describe current status of</td>
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<tr>
<td>site(s):</td>
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<tr>
<td>Hudson River PCB Sediments - from NYC Battery to Hudson Falls in</td>
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<tr>
<td>Washington County. Dredging completed in 2015, habitat reconstruction</td>
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<tr>
<td>completed in 2016, Facility decommissioning also completed in 2016.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
v. Is the project site subject to an institutional control limiting property uses? □ Yes □ No
   • If yes, DEC site ID number:
   • Describe the type of institutional control (e.g., deed restriction or easement):
   • Describe any use limitations:
   • Describe any engineering controls:
   • Will the project affect the institutional or engineering controls in place? □ Yes □ No

E.2. Natural Resources On or Near Project Site

a. What is the average depth to bedrock on the project site? ≥20 feet

b. Are there bedrock outcroppings on the project site?
   If Yes, what proportion of the site is comprised of bedrock outcroppings? □ Yes □ No

c. Predominant soil type(s) present on project site:
   
<table>
<thead>
<tr>
<th>Soil Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>LR</td>
<td>90%</td>
</tr>
<tr>
<td>TE</td>
<td>8%</td>
</tr>
<tr>
<td>MH</td>
<td>2%</td>
</tr>
</tbody>
</table>

d. What is the average depth to the water table on the project site? Average: 1.5 to 2 feet

e. Drainage status of project site soils:
   □ Well Drained: % of site
   ✔ Moderately Well Drained: % of site
   □ Poorly Drained: % of site

f. Approximate proportion of proposed action site with slopes:
   □ 0-10%: 100% of site
   □ 10-15%: % of site
   □ 15% or greater: % of site

g. Are there any unique geologic features on the project site?
   If Yes, describe: □ Yes □ No

h. Surface water features.
   i. Does any portion of the project site contain wetlands or other waterbodies (including streams, rivers, ponds or lakes)? □ Yes □ No
   
   ii. Do any wetlands or other waterbodies adjoin the project site?
   If Yes to either i or ii, continue. If No, skip to E.2.b.
   
   iii. Are any of the wetlands or waterbodies within or adjoining the project site regulated by any federal, state or local agency?
   □ Yes □ No

iv. For each identified regulated wetland and waterbody on the project site, provide the following information:

   Streams: Name __________________ Classification __________________
   Lakes or Ponds: Name __________________ Classification __________________
   Wetlands: Name __________________ Classification __________________
   Wetland No. (if regulated by DEC) T8-9 ME-16, ME-17 - Saratoga County
   Approximate Size NYS Wetland (in a.)

v. Are any of the above water bodies listed in the most recent compilation of NYS water quality-impaired waterbodies?
   If yes, name of impaired water body/bodies and basis for listing as impaired: □ Yes □ No

i. Is the project site in a designated Floodway?
   □ Yes □ No

j. Is the project site in the 100 year Floodplain?
   □ Yes □ No

k. Is the project site in the 500 year Floodplain?
   □ Yes □ No

l. Is the project site located over, or immediately adjoining, a primary, principal or sole source aquifer?
   If Yes: □ Yes □ No

   i. Name of aquifer: Principal Aquifer
m. Identify the predominant wildlife species that occupy or use the project site:

<table>
<thead>
<tr>
<th>Wildlife Species</th>
</tr>
</thead>
<tbody>
<tr>
<td>American robin</td>
</tr>
<tr>
<td>American pigeon</td>
</tr>
<tr>
<td>American crow</td>
</tr>
<tr>
<td>Gray squirrel</td>
</tr>
<tr>
<td>European starling</td>
</tr>
<tr>
<td>Virginia opossum</td>
</tr>
<tr>
<td>Geese</td>
</tr>
</tbody>
</table>

n. Does the project site contain a designated significant natural community?
   Yes ☐ No ☑
   i. Describe the habitat/community (composition, function, and basis for designation):

   ii. Source(s) of description or evaluation:

   iii. Extent of community/habitat:
       - Currently: ___________________________ acres
       - Following completion of project as proposed: ___________________________ acres
       - Gain or loss (indicate + or -): ___________________________ acres

   o. Does project site contain any species of plant or animal that is listed by the federal government or NYS as endangered or threatened, or does it contain any areas identified as habitat for an endangered or threatened species?
      Yes ☐ No ☑

   Bald Eagle identified for all three sites, Shortnose Sturgeon identified at North Plant.

   Shortnose Sturgeon, Bald Eagle

p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or as a species of special concern?
   Yes ☐ No ☑

q. Is the project site or adjoining area currently used for hunting, trapping, fishing, or shell fishing?
   Yes ☐ No ☑
   If yes, give a brief description of how the proposed action may affect that use:

E.3. Designated Public Resources On or Near Project Site

a. Is the project site, or any portion of it, located in a designated agricultural district certified pursuant to Agriculture and Markets Law, Article 25-AA, Section 303 and 304?
   Yes ☐ No ☑
   If Yes, provide county plus district name/number:

b. Are agricultural lands consisting of highly productive soils present?
   - Yes ☐ No ☑
   i. If Yes: acreage(s) on project site >.5 (north plant), >.5 (CCSD). These soils are not located near any active farming operations
   ii. Source(s) of soil rating(s): NRCS Soil Web Soil Survey

c. Does the project site contain all or part of, or is it substantially contiguous to, a registered National Natural Landmark?
   Yes ☐ No ☑
   i. Nature of the natural landmark: ☐ Biological Community ☐ Geological Feature
   ii. Provide brief description of landmark, including values behind designation and approximate size/extent:

   d. Is the project site located in or does it adjoin a state listed Critical Environmental Area?
      Yes ☐ No ☑
      i. CEA name:
      ii. Basis for designation:
      iii. Designating agency and date:
e. Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on, or has been nominated by the NYS Board of Historic Preservation for inclusion on, the State or National Register of Historic Places?  
   Yes ☐ No ☑

   i. Nature of historic/archaeological resource: ☑Archaeological Site ☐Historic Building or District Champlain Canal SCSD

   ii. Name: Albany Fort Complex

   iii. Brief description of attributes on which listing is based:

f. Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?  
   Yes ☐ No ☑

g. Have additional archaeological or historic site(s) or resources been identified on the project site?  
   Yes ☐ No ☑

   i. Describe possible resource(s):

   ii. Basis for identification:

h. Is the project site within five miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource?  
   Yes ☐ No ☑

   i. Identify resource: Lakes to Locks Passage (NYS Scenic Byway)-SCSD

   ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.):

   iii. Distance between project and resource: ___________ miles.

i. Is the project site located within a designated river corridor under the Wild, Scenic and Recreational Rivers Program 6 NYCRR 566?  
   Yes ☐ No ☑

   i. Identify the name of the river and its designation:

   ii. Is the activity consistent with development restrictions contained in 6NYCRR Part 666?  
      Yes ☐ No ☑

F. Additional Information
Attach any additional information which may be needed to clarify your project.

If you have identified any adverse impacts which could be associated with your proposal, please describe those impacts plus any measures which you propose to avoid or minimize them.

G. Verification
I certify that the information provided is true to the best of my knowledge.

Applicant/Sponsor Name: Albany County Water Purification District
Date:

Signature: __________________________ Title: __________________________
SECTION F. PROJECT DESCRIPTION AND ADDITIONAL INFORMATION

PROJECT DESCRIPTION

The Albany County Water Purification District (ACWPD) and Saratoga County Sewer District (SCSD) (Districts) are proposing the construction of a Regional Biosolids Handling Facility at the existing wastewater treatment plant (North Plant) owned and operated by ACWPD. Both Districts are transitioning away from sewage sludge incinerators (SSIs) as the technology of biosolids treatment. Prior to this, a total of five SSIs had been the technology utilized to treat and dispose of biosolids at ACWPD's South Plant (Church St., Albany) and North Plant (1 Canal Rd. South, Menands) and at the SCSD Plant (River Road, Halfmoon). As a result of aging infrastructure, more stringent air regulations, and a desire to produce biogas as a renewable resource, SCSD stopped operation of its SSI March 2016 and ACWPD entered into an Order on Consent with the NYS Department of Environmental Conservation (NYSDEC) to replace the existing SSIs with anaerobic digestion facilities.

The project consists of the following elements at each of the Districts' Plants:

ACWPD South Plant

Primary sludge is drawn from the primary settling tanks at approximately 2% total solids (TS) and is pumped directly to the three sludge holding tanks. Unthickened waste activated sludge (WAS) is drawn from the return activated sludge (RAS) wet well in the RAS pump station located adjacent to the secondary clarifiers and is pumped to the solids disposal building where it is dosed with polymer and split among three dissolved air flotation thickeners (DAFTs). The DAFTs at the South Plant typically achieve a solids content of approximately 5.5% TS. From the DAFTs, the thickened WAS flows into a wet well, and is pumped to the sludge holding tanks where it is blended with the primary sludge and with imported liquid sludge from the Village of Coeymans and the Village of Bethlehem.

From the sludge holding tanks, blended sludge is pumped back into the solids disposal building that houses two belt filter presses (BFPs). Only one of the BFPs is currently operable. The South Plant typically achieves approximately 22% TS. The majority of the solids handling process at the South Plant will remain unchanged by this project, with the exception of adding a second operational BFP. The cake that is produced at the South Plant will be hauled by truck to the North Plant for processing at a projected frequency of two truckloads per weekday or 1-2 truckloads per day on a 7-day per week basis. Currently, dewatered sludge cake at the South Plant is conveyed to a pair of MHLs. Additionally, new conveyors, odor control equipment and a permanent sludge loading facility will be incorporated into the existing solids disposal building. Site improvements include the construction of a truck turn around area.

Figure 1 South Plant Location Map N.T.S.

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SCSD Plant

Primary sludge from the SCSD Plant is drawn from the primary settling tanks and sent directly to one of four sludge holding tanks. WAS is drawn from the RAS pump station wet well and pumped to two gravity belt thickeners (GBTs), where it is dosed with polymer and thickened. Thickened WAS leaves the GBTs at approximately 6% TS and is combined with primary sludge in the sludge holding tanks. The combined sludge stream is pumped to two BFPs on the top floor of the solids disposal building. The BFPs produce sludge cake at a typical solids content of approximately 22% TS. Pressed cake is conveyed horizontally and dropped through a chute into a truck loadout facility on the ground floor. The cake that is produced at the SCSD Plant will be hauled by truck to the North Plant for processing at a projected frequency of 2-3 truckloads per weekday or 1-2 truckloads per day on a 7-day per week basis. Currently sludge cake is hauled from the SCSD Plant to a landfill for disposal. The solids handling process at the SCSD Plant will not be altered by this project, except for the solids loadout facility improvements in the existing solids disposal building, including odor control, and a new truck turn around area.

North Plant

ACWPD's North Plant generates primary sludge and WAS. Primary sludge is currently intermittently pumped from the bottom of the primary clarifiers to the sludge holding tanks. Secondary sludge from the final clarifiers is drawn into a wet well, where it is either returned to the aeration tanks or wasted. WAS is pumped from the wet well to a splitter box in the solids disposal building which distributes it to the Plant's five DAFTs. Polymer is added to these tanks to aid the sludge's thickening. Thickened WAS is then collected in a well below the DAFTs and pumped to the sludge holding tanks where it is combined with primary sludge.

The North Plant is equipped with four sludge holding tanks with a total capacity of approximately 1.1 million gallons (MG). Three sludge transfer pumps, each with a design capacity of 150 gallons per minute (gpm), currently convey the combined sludge to dewatering. Dewatering is accomplished using a set of BFPs located on the upper level of the solids disposal building.

Based on population projections for the service area sludge production at the North Plant is not anticipated to change. At the conclusion of the design and planning period (2035), the North Plant will still generate two separate streams of sludge: primary sludge and WAS. These streams will be directed separately to the sludge storage tanks, with WAS thickened first. The existing DAFTs will be replaced with GBTs. WAS will be lysed utilizing a thermal chemical hydrolysis process (TCHP).

A new liquid and cake receiving station will be constructed at the site. Currently liquid sludge/septage and fats, oils and grease (FOG) is accepted at the North plant and treated in the wet stream being discharged into primary clarifiers. On average, 25 trucks of liquid sludge/septage and FOG are accommodated by the North Plant currently. The new liquid and cake receiving station will be equipped with two cake hoppers and mixing tanks to rewet sludge cake with WAS from the plant operations. Rewet cake will be pumped to
the existing sludge holding tanks. Liquid sludge will be processed by rock traps and grinders and pumped into the existing sludge holding tanks. FOG will be stored separately in heated and mixing tanks in the new sludge receiving building and pumped directly to new anaerobic digesters.

Sludge from the existing mix tanks will be pumped to new GBTs and sludge screens in the existing solids disposal building. Thickened sludge will be pumped to one of three new anaerobic digesters. The anaerobic digesters will be located in the footprint of the existing ash lagoons. The ash lagoons will be removed from operation and replaced by new facilities, green space and stormwater retention facilities. Digested sludge will be dewatered by new dewatering equipment similar to the existing BFPs and hauled off site as a Class B biosolids.

Biogas will be utilized to fuel new thermal boilers to heat the new anaerobic digesters and drive the existing 925 kW Organic Rankine Cycle (ORC) turbine. Excess biogas will be thermally processed in an enclosed flared that is greater than 99% efficient.

The average sludge projected to be processed at the site is 51.7 dry tons per day (dtpd), which is below the original North Plant design of 64.4 dtpd (Malcolm Pirnie, 1969). Filtrates from thickening and dewatering will be treated in the existing aeration tanks at the North Plant.

Based on the current Title V Air Permits for the South Plant, North Plant and SCSD Plant it is estimated that there could be a reduction of emissions from the Project as compared to allowable emissions from the three Plants. In total the project can result in a total reduction of 63,455 tons per year of Carbon Dioxide, 100 tons per year of Nitrous Oxide and 26 tons per year of total Hazardous Air Pollutants.

The transition from sewage sludge incinicators to anaerobic digestion will result in the following benefits:

- The development of a regional facility should create operational efficiencies and reduce costs for both the ACWPD and the SCSD.
- The reduction in air emissions will improve air quality at all three locations.
- Biogas will be utilized for both heat and electricity.

See attached conceptual site plans for the North Plant for three layout alternatives.

**ADDITIONAL INFORMATION**

**South Plant**

**Response to LEAF Question E.1.1.b- total acreage 31.4**

<table>
<thead>
<tr>
<th>Land Use or Cover Type</th>
<th>Current Acreage</th>
<th>Acreage After Project Completion</th>
<th>Change (Acres +/-)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roads, buildings, other paved or impervious surfaces</td>
<td>9</td>
<td>9.5</td>
<td>+.5</td>
</tr>
<tr>
<td>Forested</td>
<td>12.7</td>
<td>12.7</td>
<td>0</td>
</tr>
</tbody>
</table>

arcadis.com
### Natural Resources on or Near Project Site

**E2.a-E2.f**

- **a. Depth to bedrock:** >6 feet
- **b. Bedrock outcroppings:** no
- **c. Predominant Soils Type:** Urban land
- **d. Average depth to water table:** not provided in USDA NRCS soils report
- **e. Drainage Status:**
  - moderately well drained -- 100%
- **f. Slopes:** 0-10% - 100%

### SCS Plant

**Response to LEAF Question E.1.1b- total acreage 35.0**

<table>
<thead>
<tr>
<th>Land Use or Cover Type</th>
<th>Current Acreage</th>
<th>Acreage After Project Completion</th>
<th>Change (Acres +/−)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roads, buildings, other paved or impervious surfaces</td>
<td>14.5</td>
<td>15.0</td>
<td>+0.5</td>
</tr>
<tr>
<td>Forested</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Meadows, grasslands or brushlands (non-agricultural, including abandoned agricultural)</td>
<td>5.3</td>
<td>4.8</td>
<td>0</td>
</tr>
<tr>
<td>Agricultural (includes active orchards, field, greenhouses etc.)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>o.e</td>
<td>0.2</td>
<td>0.2</td>
<td>0</td>
</tr>
<tr>
<td>Wetlands (freshwater or tidal)</td>
<td>14</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>Non-vegetated (bare rock, earth of fill)</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>
Natural Resources on or Near Project Site
E2.a-E2.f

a. Depth to bedrock: >6 feet
b. Bedrock outcroppings: no
c. Predominant Soil Type:
   Hudson Silt Loam  8%
   Shaker very fine sandy loam  83%
   Water  9%

d. Average depth to water table: 0-18 inches
e. Drainage Status:
   Moderately well drained: 9%
   Poorly drained: 91%
f. Slopes: 0-10% - 100%
February 1, 2019

Honorable Andrew Joyce, Chairman  
Albany County Legislature  
112 State Street, Rm 710  
Albany, NY 12207  

Re:   RP-554 – Application for Corrected Tax Roll  
      199 Elm Avenue  
      96.00-2-6  

Dear Chairman Joyce:  

Laurie Lamberty, the assessor for the Town of Bethlehem, submitted an Application for Corrected Tax Roll on behalf of the owner of the aforementioned property. Due to a clerical error, a sewer district charge was applied to the property inadvertently. According to the Commissioner of Public Works in the Town of Bethlehem the tax was added to the parcel in error, the property owners are not sewer costumers.  

Please see the enclosed documentation, it is my recommendation that the 2019 property tax bills be corrected. The correct tax amount is $1,497.86.  

Sincerely,  

[Signature]  
Maggie A. Alix, Director  
Real Property Tax Service Agency  

CC:   Dennis Feeney, Majority Leader  
      Frank Mauiriello, Minority Leader  
      Kevin Cannizzaro, Majority Counsel  
      Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Authorization to Correct Tax Roll - Town of Bethlehem

Date: February 1, 2019
Submitted By: Maggie A. Alix
Department: Real Property Tax Service Agency
Title: Director
Phone: 518-487-5291
Department Rep.: Maggie A. Alix
Attending Meeting:

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☐ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☒ Other: (state if not listed) Authorization to Correct Tax Roll - Town of Bethlehem

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed)

Contract Terms/Conditions:

Party (Name/address):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Rate Schedule/Fee:
Scope of Services:

Click or tap here to enter text.
Click or tap here to enter text.

Bond Res. No.:
Date of Adoption:

Click or tap here to enter text.
Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:
Yes ☐ No ☒

If Mandated Cite Authority:
Click or tap here to enter text.

Is there a Fiscal Impact:
Yes ☒ No ☐

Anticipated in Current Budget:
Yes ☐ No ☒
County Budget Accounts:
Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.
Appropriation Account and Line: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)
Federal: Click or tap here to enter text.
State: Click or tap here to enter text.
County: Click or tap here to enter text.
Local: Click or tap here to enter text.

Term
Term: (Start and end date) Click or tap here to enter text.
Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation
Yes ☐ No ☒
If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:
Resolution/Law Number: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)
199 Elm Avenue, Delmar, NY.
96.00-2-6

Due to a clerical error, a sewer district charge was applied to the property inadvertently. According to the Commissioner of Public Works in the Town of Bethlehem the tax was added to the parcel in error, the property owners are not sewer costumers. The corrected tax amount is $1,497.86, a difference of $72.04.
**Application for Corrected Tax Roll**

**Part 1 – General Information: To be completed in duplicate by the applicant.**

<table>
<thead>
<tr>
<th>Name(s) of owners</th>
<th>Bruce &amp; Nancy Whine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing address of owner(s) (number and street or PO box)</td>
<td>199 Elm Avenue</td>
</tr>
<tr>
<td>City, village, or post office</td>
<td>Delmar</td>
</tr>
<tr>
<td>State and ZIP code</td>
<td>NY 12054</td>
</tr>
<tr>
<td>Location of property (street address)</td>
<td>199 Elm Avenue</td>
</tr>
<tr>
<td>City, town, or village</td>
<td>Delmar</td>
</tr>
<tr>
<td>State and ZIP code</td>
<td>NY 12054</td>
</tr>
<tr>
<td>Daytime contact number</td>
<td></td>
</tr>
<tr>
<td>Evening contact number</td>
<td></td>
</tr>
<tr>
<td>Tax map number or section/block(s)</td>
<td>36.00-2-8</td>
</tr>
<tr>
<td>Property identification (tax roll or assessment roll)</td>
<td>36.00-2-8</td>
</tr>
<tr>
<td>Account number (as appears on tax bill)</td>
<td></td>
</tr>
<tr>
<td>Amount of taxes currently billed</td>
<td>1,599.90</td>
</tr>
<tr>
<td>Reasons for requesting a correction in tax roll:</td>
<td>Due to a clerical error, a sewer district charge was applied inordinately to the property.</td>
</tr>
</tbody>
</table>

I hereby request a correction of tax levied by [TOWN OF ORCHESHEM] for the year(s) **2018**.

Signature of applicant: [Signature]  
Date: 1/14/19

**Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls. If a Directed reinstatement, see instructions.**

| Date application received | 11/6/19 |
| Period for collection of taxes | 3/31/19 |
| Last day for collection of taxes without notice | 11/31/19 |
| Recommendation | Approve application □  
Deny application □ |
| Signature of official | [Signature]  
Date: 1/28/19 |

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the town/village of [Orchieshem], who must consider the attached report and recommendation as equivalent to petitions filed under section 553.

**Part 3 – For use by the tax levying body or official designated by resolution.**

Application approved (mark an X in the applicable box):  

- [ ] Clerical Error
- [ ] Error in essential fact
- [ ] Unlawful Entry
- [ ] Directed reinstatement

Amount of taxes currently billed:  

| $ 1,599.90 |

Corrected tax:  

| $ 1,497.84 |

Date notice of approval mailed to applicant:  

Date order transmitted to collecting officer:  

Application denied (reason):  

Signature of chief executive officer, or official designated by resolution:  

Date:  

General information

Where to send
Submit two copies of this application to the County Director of Real Property Tax Services (in Nassau and Tompkins Counties, submit to Chief Assessor). When to send
Submit the application only before the collection warrant expires.

Wholly exempt parcel
Attach statement signed by assessor or majority of board of assessors substantiating that assessor obtained proof that parcel should have been granted tax exempt status on tax roll.

Directed reinstatement
Indicate the type of error only for an Enhanced STAR Exemption or a senior citizens exemption that is being reinstated under the good cause authorization of Real Property Tax Law (RPTL) sections 426(6)(a-2) or 467(8-a). In such a case, the written report of the county director or village assessor must indicate that there has been a good cause finding, and a copy of the written report must be attached to this form.

Payment requirements
You may pay without interest and penalties only if:
- the application was filed with the County Director on or before the last day that taxes may be paid without interest (see Date application received in Part 2); and
- you pay the corrected tax within eight days of the date on which the notice of approval is mailed to the applicant (see Part 3).

If either of these conditions is not satisfied, interest, penalties, or both must be paid on the corrected tax.

For use by Collecting Officer:
Order from tax levying body received on ____________________________ Date

<table>
<thead>
<tr>
<th>Corrected tax due</th>
<th>Date tax roll corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest and penalties (if applicable)</td>
<td>Date tax bill corrected</td>
</tr>
<tr>
<td>Total corrected tax due</td>
<td>Date application and order added to tax roll</td>
</tr>
<tr>
<td>Date payment received</td>
<td></td>
</tr>
</tbody>
</table>

Signature of collecting officer ____________________________ Date ____________________________
January 16, 2019

Maggie Alix, Director
Albany County Real Property Services
112 State Street, Room 1340
Albany, NY 12207

Re: Bruce & Nancy Wiane
199 Elm Avenue
96.00-2-6

Dear Maggie:

Enclosed please find form RP 554 and a copy of the Town of Bethlehem tax bill for year 2019. Due to a clerical error, a sewer district charge was applied to the property inadvertently. The bill reflects an amount owed of $1,569.90. The correct amount should be $1,497.86. This bill has not been paid.

The corrected bill should reflect the following:

<table>
<thead>
<tr>
<th>Tax Year</th>
<th>Tax Amount of Current Bill</th>
<th>Tax Amount of Adjusted Bill</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>$1,569.90</td>
<td>$1,497.86</td>
</tr>
</tbody>
</table>

Should you have any questions regarding this matter, please do not hesitate to contact me.

Sincerely,

Laurie Lambertson
Assessor

LL/div

Enclosures
TOWN OF BETHLEHEM
2019 PROPERTY TAX BILL

MAKE CHECKS PAYABLE TO:
Receiver of Taxes
PO Box 10694
Albany, NY 12201-2698
Phone: (518) 439-4953 Extension 1181

TO PAY IN PERSON:
Buildings Town Hall
Key Bank, at Four Corners
Capital Bank, Slingerlands
National Bank of Coxsackie,
Gloumont

SWIS #/L Address & Legal Description
01200 96.00-2-6
Address: 199 ELM AVE
Municipality: BETHLEHEM
School: BETHLEHEM CENTRAL. 051
NYS Tax & Finance School District Code:
1 FAMILY RES Roll Sect: 1
Parcel Dimensions: 240.72x200x166.5900
Bank Code:

Estimated State Aid: CNTY: 90,121,595
TOWN: 1,032,553

PROPERTY TAXER'S BILL OF RIGHTS:
The assessors estimate the full market value of this property as of July 1, 2017 was: 192,684
The total assessed value of this property is: 184,000
The uniform percentage of value used to establish assessments in your municipality was: 095.00 %

If you feel your assessment is too high, you have the right to seek a reduction from the future. For further information, please visit your assessor for a booklet, "How to File a Complaint on Your Assessment?". Please note that the period for filing complaints on the above assessment has passed.

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
<th>Tax Percentage</th>
<th>Exemption</th>
<th>Value</th>
<th>Tax Percentage</th>
<th>Exemption</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Purpose</td>
<td>3,041,917.1</td>
<td>4.7</td>
<td>12,694,000</td>
<td>3,073,756</td>
<td>69.81</td>
<td></td>
</tr>
<tr>
<td>General Fund Tax</td>
<td>3,323,669</td>
<td>5.0</td>
<td>11,500,000</td>
<td>3,115,800</td>
<td>314.78</td>
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</tr>
<tr>
<td>Highway Tax</td>
<td>1,477,219</td>
<td>2.3</td>
<td>94,000</td>
<td>1,463,399</td>
<td>77.23</td>
<td></td>
</tr>
<tr>
<td>WATER DISTRICT #1</td>
<td>1,702,000</td>
<td>3.0</td>
<td>94,000</td>
<td>1,608,000</td>
<td>78.91</td>
<td></td>
</tr>
<tr>
<td>AMBULANCE/EMS</td>
<td>1,702,000</td>
<td>3.0</td>
<td>94,000</td>
<td>1,608,000</td>
<td>78.91</td>
<td></td>
</tr>
<tr>
<td>DELMAR FIRE DISTRICT</td>
<td>393,594</td>
<td>0.7</td>
<td>94,000</td>
<td>302,994</td>
<td>51.58</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL TAXES DUE: $1,569.90

PAYMENT SCHEDULE
Pay By: 01/12/2019
Amount: 1,500.90
Total Due: 1,569.90
Apply For Third Party Notification By: CA CH

TOWN OF BETHLEHEM
2019 PROPERTY TAX BILL

Receiver's Stub
Bill No: 13034
Tax ID: 5990

Town of: BETHLEHEM
School: BETHLEHEM CENTRAL. 051
Property Address: 199 ELM AVE

WINNIE BRUCE M
WINNIE NANCY J
199 Elm Ave
DELMAR NY 12054

RECEIPTS CAN BE DOWNLOADED FROM WWW.TOWNOFBETHLEHEM.ORG
**RECEIVER STUB MUST BE INCLUDED WITH PAYMENT**

0000000000000000001569904
Laurie Lambertsen

From: Alicia Roney  
Sent: Tuesday, January 15, 2019 3:59 PM  
To: Laurie Lambertsen  
Subject: FW: 199 Elm Ave

199 Elm Ave Correction needed  
Please see email from George below.

Alicia M. Roney  
Receiver of Taxes  
Town of Bethlehem  
445 Delaware Ave, Delmar NY 12054  
518-439-4955 X1181  
518-439-4730  
aroney@townofbethlehem.org  
www.townofbethlehem.org

From: George Kansas  
Sent: Thursday, January 10, 2019 1:08 PM  
To: Alicia Roney <aroney@townofbethlehem.org>  
Cc: Tina Ross <tross@townofbethlehem.org>  
Subject: RE: 199 Elm Ave

Alicia,

It appears that sewer tax was added to this property in error. Please remove it from the parcel since they are not a sewer customer at this time. Should they choose to connect to the sewer system in the future, they will be assessed this ad valorem sewer tax.

Thank you,  
George

George S. Kansas, P.E.  
Commissioner of Public Works  
Town of Bethlehem  
445 Delaware Avenue  
Delmar, New York 12054  
(P) (518) 439-4955 x 1181; (F) (518) 439-5808  
kansas@townofbethlehem.org

From: Alicia Roney  
Sent: Wednesday, January 09, 2019 8:40 AM  
To: George Kansas <kansas@townofbethlehem.org>  
Cc: Tina Ross <tross@townofbethlehem.org>  
Subject: 199 Elm Ave
February 1, 2019

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Rm 710
Albany, NY 12207

Re: RP-554 – Application for Corrected Tax Roll
5 Amsterdam Avenue, Glenmont, NY 12077
109.14-6-9

Dear Chairman Joyce,

Laurie Lambertsen, the assessor for the Town of Bethlehem, submitted an Application for Corrected Tax Roll on behalf of the owner of the aforementioned property. Due to clerical error, the low income Senior Aged exemption was calculated using the wrong percentage. The exemption was calculated at 15% when in fact it should have been calculated at 50%.

Please see the enclosed documentation, it is my recommendation that the 2019 property tax bills be corrected. The correct tax amount is $1,409.45.

Sincerely,

Maggie A. Alix, Director
Real Property Tax Service Agency

CC: Dennis Peeny, Majority Leader
Frank Mauriello, Minority Leader
Kevin Cannizzaro, Majority Counsel
Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Authorization to Correct Tax Roll - Town of Bethlehem

Date: February 1, 2019
Submitted By: Maggie A. Alix
Department: Real Property Tax Service Agency
Title: Director
Phone: 518-487-5291
Department Rep.
Attending Meeting: Maggie A. Alix

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☐ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☒ Other: (state if not listed) Authorization to Correct Roll - Town of Bethlehem

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
- □ Change Order/Contract Amendment
- □ Purchase (Equipment/Supplies)
- □ Lease (Equipment/Supplies)
- □ Requirements
- □ Professional Services
- □ Education/Training
- □ Grant
  Choose an item.
  Submission Date Deadline Click or tap to enter a date.
- □ Settlement of a Claim
- □ Release of Liability
- □ Other: (state if not listed)
  Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):
  Click or tap here to enter text.

Additional Parties (Names_addresses):
  Click or tap here to enter text.

Amount/Raise Schedule/Fee:
  Click or tap here to enter text.
Scope of Services:
  Click or tap here to enter text.

Bond Res. No.:
Date of Adoption:
  Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:
  Yes □ No ☒
If Mandated Cite Authority:
  Click or tap here to enter text.

Is there a Fiscal Impact:
  Yes ☒ No □
Anticipated in Current Budget:
  Yes □ No ☒
County Budget Accounts:
Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)
Federal: Click or tap here to enter text.
State: Click or tap here to enter text.
County: Click or tap here to enter text.
Local: Click or tap here to enter text.

Term
Term: (Start and end date) Click or tap here to enter text.
Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation Yes ☐ No ☒
If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:
Resolution/Law Number: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)
5 Amsterdam Avenue, Glenmont, NY
109.14-6-9

Due to clerical error, the low income Senior Aged exemption was calculated using the wrong percentage. The exemption was calculated at 15% when in fact it should have been calculated at 50%. The exemption is income based. The discrepancy arose in determining the interest earned on the property owner’s IRA fund.

It is my recommendation that the 2019 property tax bills be corrected. The correct tax amount is $1,409.45, a difference of $532.16.
If you received a STAR exemption on this property for the 2015-16 school year, this application will also serve as an application for the Enhanced STAR exemption. If not, you may be eligible for the Enhanced STAR credit, which is provided in the form of a check. To receive an Enhanced STAR check, you must register for it. For more information, visit www.tax.ny.gov/star or call (518) 457-2038.

a  Name of Owner(s)  Source of Income  Amount of Income  

-----------------  -----------------  -----------------  

Total income of owner(s) ........................................ 

Name of spouse(s) if not owner of property  Source of Income of spouse(s)  Amount of Income of spouse(s)  

-----------------  -----------------  -----------------  

Total income of spouse(s) ........................................ 

Total income of owner(s) and spouse(s) ...............  

b  Of the income in line a, how much, if any, was used to pay for an owner's care in a residential health care facility? Attach proof of amount paid; enter 0 if not applicable. 

c  Line a minus line b. 

d  If a deduction for unreimbursed medical and prescription drug expenses is authorized by any of the municipalities in which property is located (contact assessor for information), complete the following:

(i) Medical and prescription drug costs: ........................................  

(ii) Subtract amount of (i) paid or reimbursed by insurance: ........................................  

(iii) Unreimbursed amount of (i) (attach proof of expenses and reimbursement, if any; enter 0 if option not available): ........................................  

Subtotal income of owner(s) and spouse(s) (line a minus line b, item (iii)) ....................  

e  If a deduction for veteran's disability compensation is authorized by any of the municipalities in which property is located, complete the following: Veteran's disability compensation received. Attach proof; enter 0 if not applicable. 

Total income of owner(s) and spouse(s) (line d subtotal minus line e) ....................  

5 Certification

I (we) certify that all statements made on this application are true and correct to the best of my (our) belief. I (we) understand that any willful false statement of material fact will be grounds for disqualification from further exemption for a period of five years, and a fine of not more than $100.

Signature  Marital Status  Phone Number  Date  

(If more than one owner, all must sign.) 

[Signature]  [Marital Status]  [Phone Number]  [Date]  

This Area for Assessor's Use Only

Date (renewal application filed)  Approved □  Disapproved □  

Exemption applies to taxes levied by or for:  City/Town  % □  County  % □  School  % □  Village  % □  

Assessor's Signature  Date  

[Signature]  [Date]  

[Correction]
Renewal Application for Partial Tax Exemption
for Real Property of Senior Citizens

To be filed with your local assessor by taxable status date. Do not file this form with the Office of Real Property Tax Services.

Return no later than 3/1/2018

<table>
<thead>
<tr>
<th>To: Laurie Lambertsen</th>
</tr>
</thead>
<tbody>
<tr>
<td>Town of Bethlehem</td>
</tr>
<tr>
<td>Assessor</td>
</tr>
<tr>
<td>518-439-6955</td>
</tr>
<tr>
<td>445 Delaware ave</td>
</tr>
<tr>
<td>Delmar, NY</td>
</tr>
<tr>
<td>12054-</td>
</tr>
</tbody>
</table>

Singerland, Janice J
5 Amsterdam Ave
Glenmont, NY 12077

<table>
<thead>
<tr>
<th>Owner Telephone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day 518-767-7243</td>
</tr>
<tr>
<td>Evening ( )</td>
</tr>
<tr>
<td>E-mail Address</td>
</tr>
<tr>
<td>(optional)</td>
</tr>
</tbody>
</table>

Location of property

<table>
<thead>
<tr>
<th>5 Amsterdam Ave</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street address</td>
</tr>
<tr>
<td>Bethlehem</td>
</tr>
<tr>
<td>City / Town</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Village (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOWN OF BETHLEHEM</td>
</tr>
<tr>
<td>ASSESSORS OFFICE</td>
</tr>
<tr>
<td>Ravenna-Cosynmans</td>
</tr>
<tr>
<td>School district: SEP 27 2017</td>
</tr>
</tbody>
</table>

1 Property Identification (see tax bill or assessment roll)
   Tax map number or section/blocklot 109.14-8-9

2 Since filing your application last year, fully describe in the lines below any changes in:
   a. title to the property (due to death, addition or deletion of owner);
   b. legal residence or occupancy of the property (e.g., confinement of owner in hospital or nursing
      home, divorce, legal separation or abandonment by spouse); or
   c. use of residence for other than residential purposes (store, office, farm, etc.);
   d. Children of owners, tenants or leaseholders living on the premises attending public school grades
      pre-K-12; if so, give the name and location of the school or schools, and state whether such child
      or children were brought into the property in whole or in substantial part for the purpose of attending
      a particular school within the school district.

   Mark an X in the box if there has been no change in items a, b, c and d above. [X]

   Explanation of changes that have occurred as indicated on line 2 (attach additional sheets if necessary).

3 Did the owner or spouse file a federal or New York State income tax return for the preceding year?
   If Yes, attach a copy of the return(s). [X] Yes [ ] No

4 Provide the income of each owner and spouse of each owner for the calendar year immediately preceding
   the date of application on following page, except for an owner who is absent from the residence due to
   divorce, legal separation or abandonment. Attach additional sheets if necessary.

   Income does not include:
   • gifts,
   • [inher]itances,
   • a return of capital,
   • proceeds of a reverse mortgage (although interest or dividends realized from the investment of such
     proceeds are income),
   • reparation payments to victims of Nazi persecution, or monies earned through employment in the Federal
     Foster Grandparent Program.
To: Donna Stagnitta, town of Bethlehem Assessors office

From: Todd Slingerland, CFP

RE: Janice Slingerland, STAR exemption 2017 tax year

This letter serves as clarification of Mrs. Slingerland's John Hancock IRA account ending 6/30/2015. This is an IRA funded with a variable annuity, hence it does not earn interest, receive dividends, nor does it participate in any form of distributable capital gains. It simply increases or decreases in value as the underlying variable sub-account units increase or decrease in value per share.

I hope this helps in understanding her IRA account statements previously provided, if you should require anything further please feel free to contact my office at the above mentioned number. Thank you in advance for your help with this situation.

Todd Slingerland, CFP
TOWN OF BETHLEHEM
2019 PROPERTY TAX BILL
Bill No: 11151
Tax ID: 5106

MAKE CHECKS PAYABLE TO
Receiver of Taxes
PO Box 10508
Albany, NY 12201-2058
Phone: (518) 439-0535 Extension 1181

TO PAY IN PERSON
Bethlehem Town Hall
Key Bank, at Four Corners
Slingerland Janice J
Capitol Bank, Slingerlands
5 Amsterdam Ave
National Bank of Castleton,
Glenmont

SWIS NYS Address & Legal Description
012080 101.4-6-9
Address: 5 AMSTERDAM AVE
Muni: BETHLEHEM
School: RCS CENTRAL SCHOOL - 524
NYC Tax & Finance School District Code: 1
FAMILY RES

Parcel Dimensions: 95,3400 X 108,7100
Bank Code:

Estimated State Aid: CNTY 90,121,995
TOWN 1,023,355

PROPERTY TAXPAYER'S BILL OF RIGHTS
The assessor estimates the Full Market Value of this property as of July 1, 2017:
250,632
The Total Assessed Value of this property is:
238,100
The Uniform Percentage of Value used to establish assessments in your municipality was:
088.00%

If you feel your assessment is too high, you have the right to seek a reduction in the future. For further information, please ask your assessor for the booklet, "How to File a Complaint on Your Assessment". Please note that the period for filing complaints on the above assessment has passed.

Exemption Value Tax Purpose Exemption Value Tax Purpose Exemption Value Tax Purpose
EX SEN ALP 54,942 CNTRTOWN SCH

PROPERTY TAXES
Taxable Purpose Total Tax Local % Change From Value of Value Rates Per $1000 Tax Amount
 COUNTY PURPOSES 1,407,161 1,478 3,241,911 3,241,911 3,650,965 .757,885 1,366,664
 GENERAL FUND TAX 602,309 3.0 602,309 602,309 602,309 .757,885 1,366,664
 HIGHWAY TAX 2,248,415 3.0 2,248,415 2,248,415 2,248,415 .757,885 1,366,664
 WATER DISTRICT #1 436,357 3.0 436,357 436,357 436,357 .757,885 1,366,664
 BETHLEHEM SEWER EXT 3 1,247,299 3.0 1,247,299 1,247,299 1,247,299 .757,885 1,366,664
 AMBULANCEMS 1,007,360 7.8 1,007,360 1,007,360 1,007,360 .757,885 1,366,664
 SELLFAIRE FIRE DISTRICT

TOTAL TAXES DUE: $5,941,661

PAYMENT SCHEDULE
Payment int Amount Total Due
Pay By: 1/1/2019 00 1,941.61 1,941.61
2/28/2019 19.42 1,961.03 1,961.03
4/30/2019 52.27 1,941.61 1,941.61
6/30/2019 154.20 1,941.61 1,941.61
Apply For Third Party Notification By: CA CH

TOWN OF BETHLEHEM
2019 PROPERTY TAX BILL
Receiver's Stub

012080 101.4-6-9
Town: BETHLEHEM
Property Address: 5 AMSTERDAM AVE

RECEIPTS CAN BE DOWNLOADED FROM WWW.TOWNOFBETHLEHEM.ORG
** RECEIVER STUB MUST BE INCLUDED WITH PAYMENT**
January 16, 2019

Maggie Alix, Director
Albany County Real Property Services
112 State Street, Room 1340
Albany, NY 12207

Re: Janice Slingerland
5 Amsterdam Avenue
109.14-6-9

Dear Maggie:

Enclosed please find form RP 554 and a copy of the Town of Bethlehem tax bill for year 2019. Due to a clerical error, the Senior with Limited Income exemption was calculated at an incorrect rate. The rate reflected on the bill is 15%. The correct rate should be 50%. The bill reflects an amount owed of $1,941.61. The correct amount should be $1,409.45. This bill has not been paid.

The corrected bill should reflect the following:

<table>
<thead>
<tr>
<th>Tax Year</th>
<th>Tax Amount of Current Bill</th>
<th>Tax Amount of Adjusted Bill</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>$1,941.61</td>
<td>$1,409.45</td>
</tr>
</tbody>
</table>

Should you have any questions regarding this matter, please do not hesitate to contact me.

Sincerely,

Laurie Lambertsen
Assessor

LL/dv

Enclosures

Visit the Town of Bethlehem Website at http://www.townofbethlehem.org
Instructions

General Information

Where to send
Submit two copies of this application to the County Director of
Real Property Tax Services (in Nassau and Tompkins Counties,
submit to the Chief Assessing Officer).

When to send
Submit this application only before the collection warrant
expires.

Wholly exempt parcel
Attach statement signed by assessor or majority of board of
assessors substantiating that assessor obtained proof that
parcel should have been granted tax exempt status on tax roll.

Directed reinstatement
Indicate the type of error only for an Enhanced STAR Exception
or a senior citizens exemption that is being reinstated under
the good cause authorization of Real Property Tax Law (RPTL)
sections 425(5)(a-2) or 467(8-a). In such a case, the written
report of the county director or village assessor must indicate
that there has been a good cause finding, and a copy of the
written report must be attached to this form.

Payment requirements
You may pay without interest and penalties only if:

- the application was filed with the County Director on or before
  the last day that taxes may be paid without interest (see Date
  application received in Part 2); and

- you pay the corrected tax within eight days of the date on
  which the notice of approval is mailed to the applicant (see
  Part 3).

If either of these conditions is not satisfied, interest, penalties, or
both must be paid on the corrected tax.

For use by Collecting Officer:
Order from tax levying body received on ________________________ Date

<table>
<thead>
<tr>
<th>Corrected tax due</th>
<th>Date tax roll corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interest and penalties (if applicable)</th>
<th>Date tax bill corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total corrected tax due</th>
<th>Date application and order added to tax roll</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date payment received

<table>
<thead>
<tr>
<th>Signature of collecting officer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>


Part 1 - General information: To be completed in duplicate by the applicant.

Names of owners

Janice Slingenland

Mailing address of owners (number and street or P.O. box)

5 Amsterdam Avenue

City, village, or post office

Glenmont

State

NY

ZIP code

12077

Location of property (street address)

5 Amsterdam Avenue

City, town, or village

Glenmont

State

NY

ZIP code

12077

Daytime contact number

Evening contact number

Tax roll number of section/block/lot: Property identification (see tax bill or assessment roll)

109.14-6-9

Account number (as appears on tax bill)

6108

Amount of taxes currently billed

1,041.81

Reasons for requesting a correction to tax roll:

Due to a clerical error, the Section with Limited Income exemption was calculated at an incorrect rate. The rate reflected on the bill is 16%. The correct rate should be 60%.

I hereby request a correction of tax levied by Town of Bethlehem for the year(s) 2019.

(County, city, village, etc.)

Signature of applicant

Laurie J. Lambert

Date

11/11/19

Part 2 - To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls. If a Directed reinstatement, see instructions.

Date application received

1/16/19

Period of warrant for collection of taxes

3/31/19

Last day for collection of taxes without interest

1/18/19

Recommendation

Approve application [x] Deny application [ ]

Signature of official

Date

1/28/19

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Bethlehem, who must consider the attached report and recommendation as equivalent of petitions filed under section 563.

Part 3 - For use by the tax levying body or official designated by resolution (insert number or date, if applicable):

Application approved (mark an X in the applicable box):

Clinical error [x] Error in essential fact [ ] Unlawful Entry [ ] Directed reinstatement [ ]

Amount of taxes currently billed

$1,941.41

Corrected tax

$1,409.45

Date notice of approval mailed to applicant

Date order transmitted to collecting officer

Application denied (reason):


Signature of chief executive officer, or official designated by resolution

Date
February 1, 2019

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Rm 710
Albany, NY 12207

Re: RP-554 – Application for Corrected Tax Roll
94 French Mill Road
96.00-2-6

Dear Chairman Joyce:

Karen VanWagenen, the assessor for the Town of Guilderland, submitted an Application for Corrected Tax Roll on behalf of the Town of Guilderland. The Town of Guilderland took ownership of the aforementioned property by deed; recorded January 12, 2018. The conveyance was prior to taxable status day and therefore should have been exempt on the 2018 Final Assessment Roll. A correction is warranted due to an unlawful entry; this property is wholly exempt from taxation.

Please see the enclosed documentation, it is my recommendation that the 2019 property tax bills be negated.

Sincerely,

Maggie A. Alix, Director
Real Property Tax Service Agency

CC: Dennis Feeny, Majority Leader
Frank Maurello, Minority Leader
Kevin Cannizzaro, Majority Counsel
Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Authorization to Correct Tax Roll - Town of Guilderland

Date: February 1, 2019
Submitted By: Maggie A. Alix
Department: Real Property Tax Service
Title: Director
Phone: 518-487-5291
Department Rep.
Attending Meeting: Maggie A. Alix

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☐ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☒ Other: (state if not listed)

Authorization to Correct Tax Roll - Town of Guilderland

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee:
Click or tap here to enter text.
Scope of Services:
Click or tap here to enter text.

Bond Res. No.:
Date of Adoption:
Click or tap here to enter text.
Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:
Yes ☐ No ☒

If Mandated Cite Authority:
Click or tap here to enter text.

Is there a Fiscal Impact:
Yes ☒ No ☐

Anticipated in Current Budget:
Yes ☒ No ☐
The Town of Guilderland took ownership of 94 French Mill Road by deed; recorded January 12, 2018. The conveyance was prior to taxable status day (03/01/18) and therefore should have been exempt on the 2018 Final Assessment Roll. A correction is warranted due to an unlawful entry; this property is wholly exempt from taxation. The property should be coded with a 13500 - Town Owed exemption and moved from Roll Section 1 (taxable) to Roll Section 8 (wholly exempt).

It is my recommendation that the 2019 property tax bills be negated.
Part 1 – General information: To be completed in duplicate by the applicant.

<table>
<thead>
<tr>
<th>Names of owners</th>
<th>Location of property (street address)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Town of Guilderland</td>
<td>94 Frenche Mill Rd</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing address of owners (number and street or PO box)</th>
<th>City, town, or village</th>
</tr>
</thead>
<tbody>
<tr>
<td>PO Box 339</td>
<td>Guilderland NY 12084</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, village, or post office</th>
<th>State</th>
<th>ZIP code</th>
<th>City, town, or village</th>
<th>State</th>
<th>ZIP code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guilderland</td>
<td>NY</td>
<td>12084</td>
<td>Guilderland NY 12084</td>
<td>NY</td>
<td>12084</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Daytime contact number</th>
<th>Evening contact number</th>
<th>Tax map number of section/book/lot: Property identification (see tax bill or assessment roll)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Account number (as appears on tax bill)</th>
<th>Amount of taxes currently billed</th>
</tr>
</thead>
<tbody>
<tr>
<td>005554</td>
<td>77.53</td>
</tr>
</tbody>
</table>

Reasons for requesting a correction to tax roll:

Tax Exemption 13500 should have been applied but was not applied to the parcel 39.00-2-66.4 for the Final 2018 Assessment Roll.

I hereby request a correction of tax levied by **Town of Guilderland** for the year(s) **2019**.

Signature of applicant

Karen M. Van Wagener

Date

01-02-2019

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls. If a Directed reinstatement, see instructions.

<table>
<thead>
<tr>
<th>Date application received</th>
<th>Period of warrant for collection of taxes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/9/19</td>
<td>3/31/19</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Last day for collection of taxes without interest</th>
<th>Recommendation</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/31/19</td>
<td>Approve application</td>
<td>1/30/19</td>
</tr>
</tbody>
</table>

Signature of official

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of **Guilderland** who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution

Application approved (mark an X in the applicable box):

- Clerical error
- Error in essential fact
- Unlawful Entry **X**
- Directed reinstatement

<table>
<thead>
<tr>
<th>Amount of taxes currently billed</th>
<th>Corrected tax</th>
</tr>
</thead>
<tbody>
<tr>
<td>77.53</td>
<td>0.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date notice of approval mailed to applicant</th>
<th>Date order transmitted to collecting officer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Application denied (reason):

---

Signature of chief executive officer, or official designated by resolution

---
February 1, 2019

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Rm 710
Albany, NY 12207

Re: RP-554 – Application for Corrected Tax Roll
94 French Mill Road
96.00-2-6

Dear Chairman Joyce:

Karen VanWagenen, the assessor for the Town of Guilderland, submitted an Application for Corrected Tax Roll on behalf of the Town of Guilderland. The Town of Guilderland took ownership of the aforementioned property by deed; recorded January 12, 2018. The conveyance was prior to taxable status day and therefore should have been exempt on the 2018 Final Assessment Roll. A correction is warranted due to an unlawful entry; this property is wholly exempt from taxation.

Please see the enclosed documentation, it is my recommendation that the 2019 property tax bills be negated.

Sincerely,

Maggie A. Alix, Director
Real Property Tax Service Agency

CC: Dennis Feeny, Majority Leader
    Frank Mauriello, Minority Leader
    Kevin Cannizzaro, Majority Counsel
    Minority Counsel
The Town of Guilderland acquired the parcel designated as #39.00-2-66.4. The deed was recorded at Albany County on January 12, 2018. A copy is attached.

The property should have been changed from roll section 1 to roll section 8 prior to the 2018 Tentative and Final Assessment rolls. A copy of the 2018 Final Assessment roll entry is attached. The exemption to be applied is #13500 - Town Owned.

The exemption and roll section changes were not done prior to the 2019 Town and County Tax Bill. The Tax Bill #005554 states that a total of $168.70 is due without penalty by January 31, 2019. The county portion of the bill is $91.17 and the town portion of the bill is $77.53. The tax bill should be $0.00 with the exemption #13500 applied.

Karen M. Van Wagenen, Assessor
Town of Guilderland
5209 Western Tpke.
P.O. Box 339
Guilderland, NY 12084
(518)366-1980 ext. 1025
(518)366-3955 Fax
vanwagenenk@togny.org
### GUILDERLAND 2019 PROPERTY TAX

**Tax Map ID**: 39.00.2-68.4

**Fiscal Year**: 01/01/2019 to 12/31/2019

**Warrant Date**: 12/31/2018

**Bill #**: 005554

**Property Description and Location**

Property Address:

TOWN OF GUILDERLAND

PO BOX 339

Guilderland, NY 12084

**ONLINE TAX PAYMENT**

WWW.TAXLOOKUP.NET

---

**Star Assessment Information**

Guilderland Town Hall

PO Box 339

Guilderland, NY 12084

---

### Levy Description | Taxable Value | Tax Rate | Tax Levy | % Levy Change | Tax Amount
--- | --- | --- | --- | --- | ---
County Tax | $20000.00 | 0.56841600 M | $11368.32 | 0.00 | $11368.32
Town General | $20000.00 | 0.26667000 M | $5333.40 | 0.00 | $5333.40
Highway 2 | $20000.00 | 0.36123000 M | $7224.60 | 0.00 | $7224.60
Albany Co Elec | $20000.00 | 0.01322000 M | $2644.00 | 0.00 | $2644.00
NYS Retiremet | $20000.00 | 0.06640000 M | $1328.00 | 0.00 | $1328.00
All pc Ambulance Del | $20000.00 | 0.34787000 M | $6957.40 | 0.00 | $6957.40
Guilderland civil | $20000.00 | 0.28224000 M | $5644.80 | 0.00 | $5644.80

**Total Tax Due**: 168.70

---

**(For receipt, check the box and return entire bill with payment)**

GUILDERLAND 2019 PROPERTY TAX

*005554*

**Check** | **Cash** | **Town** | **013089 Bill #** | **005554**
--- | --- | --- | --- | ---
Paid By | **20000.00** | **168.70** | **12/07** | **11368.32**

**Tax Penalty END NOTICE Pay on Or before**

| 168.70 | 0.00 | 0.00 | 01/13/2019 |
| 168.70 | 1.63 | 0.00 | 02/28/2019 |
| 168.70 | 3.37 | 0.00 | 04/01/2019 |

**Pay This Amount**

| 168.70 | 168.70 |
| 170.39 | 172.07 |

---

**Returned Check Fee**: $20.00

Guilderland Town Hall

PO Box 339

Guilderland, NY 12084
<table>
<thead>
<tr>
<th>TAX MAP PARCEL NUMBER</th>
<th>PROPERTY LOCATION &amp; CLASS</th>
<th>ASSESSMENT</th>
<th>EXEMPTION CODE</th>
<th>COUNTY TAXABLE VALUE</th>
<th>TOWN TAXABLE VALUE</th>
<th>SCHOOL TAXABLE VALUE</th>
<th>SPECIAL DISTRICTS</th>
<th>TAXABLE VALUE</th>
<th>FULL MARKET VALUE</th>
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<tbody>
<tr>
<td>39.00-2-66.4</td>
<td>94 French Hill Rd.</td>
<td>20,000</td>
<td>3901 Alt-gc ambulance dst</td>
<td>20,000</td>
<td>20,000</td>
<td>20,000</td>
<td>20,000 TO</td>
<td>20,000 TO</td>
<td>25,674</td>
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<tr>
<td>39.00-2-66.4</td>
<td>Gulderland, Town of</td>
<td>210.1 Famly Res</td>
<td>422803</td>
<td>41834</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>51,300</td>
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<tr>
<td>39.00-2-66.4</td>
<td>2841 Ryan Pl</td>
<td>101 Fox Run Dr</td>
<td>201.1 Famly Res</td>
<td>41834</td>
<td>0</td>
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<td>0</td>
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<tr>
<td>39.00-2-66.4</td>
<td>Schenectady, NY 12303</td>
<td>7072 Suzanne Ln</td>
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<td>41834</td>
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<td>44,700</td>
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<td>41834</td>
<td>0</td>
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<td>0</td>
<td>44,700</td>
<td></td>
</tr>
</tbody>
</table>
INSTRUMENT #: R2018-1025
Receipt#: 20180200196
Clerk: SP
Rec Date: 01/12/2018 11:31:22 AM
Doc Grp: D
Descrip: DEED
Num Pgs: 4
Rec'd Frm: TOWN OF GUILDERLAND
Party1: BOHL RICHARD
Party2: TOWN OF GUILDERLAND
Muni: GUILDERLAND TOWN

Recording:
Cover Page 5.00
Recording Fee 35.00
Cultural Ed 14.25
Records Management - Coun 1.00
Records Management - Stat 4.75
TP584 5.00
RP5217 - County 9.00
RP5217 All others - State 241.00
Sub Total: 315.00
Transfer Tax
Transfer Tax - State 0.00
Sub Total: 0.00
Total: 315.00

***** Transfer Tax *****
Transfer Tax #: 3922
Transfer Tax
Total: 0.00

THIS PAGE CONSTITUTES THE CLERK'S ENDORSEMENT, REQUIRED BY SECTION 316-a (5) & 319 OF THE REAL PROPERTY LAW OF THE STATE OF NEW YORK.

Bruce A. Hidley
Albany County Clerk
WARRANTY DEED WITH LIEN COVENANT

THIS INDENTURE, made the 19th day of April, 2017,

BETWEEN

Richard Bohl, an individual residing at 26 Jay Road West, Lake George, New York 12854

Party of the first part, and

Town of Guilderland, having offices at 5209 Western Turnpike, New York 12084

Parties of the second part,

WITNESSETH that the parties of the first part, in consideration of One Dollar ($1.00) lawful money of the United States, and other good and valuable consideration, paid by the parties of the second part do hereby grant and release unto the parties of the second part, their heirs and assigns forever,

ALL THAT LOT, PIECE OR PARCEL OF LAND, situate in the Town of Guilderland, County of Albany, State of New York, as described on attached SCHEDULE "A".

This premises being commonly known as 94 Frenches Mill Road.

BEING the same premises conveyed by ABC-Operating Corporation to Richard Bohl by Deed dated December 20, 2007, and recorded in the Albany County Clerk's Office on January 8, 2008, in Book 2907 of Deeds at page 840.

SUBJECT TO ALL covenants, easements and restrictions of record.

TOGETHER, with the appurtenances and all the estate and rights of the parties of the first part in and to said premises,

TO HAVE AND TO HOLD the premises herein granted unto the parties of the second part, their heirs and assigns forever.

AND said parties of the first part covenant as follows:

FIRST, that the parties of the second part shall quietly enjoy the said premises;

SECOND, that said parties of the first part would forever WARRANT the title to said premises.

THIRD, That in Compliance with Sec. 13 of the Lien Law, the grantor(s) will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the cost of the
improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose.

IN WITNESS WHEREOF, the parties of the first part have hereunto set their hands and seals the day and year first above writ

IN PRESENCE OF

Richard Bohl

STATE OF NEW YORK
COUNTY OF ALBANY ss: NE DC

On the 9th day of November, 2017, before me, the undersigned, personally appeared RICHARD BOLI, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that they executed the same in their capacity, and that by their signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

DAVID W. PIKE
Notary Public - State of New York
No. 01P16387629
Qualified in Warren County
My Commission Exp. 05/01/2021
WESTCOR LAND TITLE INSURANCE COMPANY

Title No. W17-GA-3413

SCHEDULE A
PROPERTY DESCRIPTION

All that certain piece or parcel of land, situate in the Town of Guilderland, County of Albany and State of New York known as Lot #4 as shown on the Subdivision Map entitled "French's Mill Road Subdivision, T/O Guilderland, Albany Co., New York" made by Infinigy Engineering & Surveying dated December 30, 2008, and filed February 18, 2009 in the Albany County Clerk's Office as Map No. D172-12279, and being approximately 54.3 acres.
PROPERTY INFORMATION

1. Property Location
   French Hill Road
   Guilderland
   12009

2. Buyer Name
   Bohl
   Richard

3. Tax Billing Address
   [Information redacted]

SALE INFORMATION

4. Date of Sale/Transfer
   04/19/2017

5. Full Sale Price
   0.00

6. Year of Assessment Roll from which Information Taken
   17

7. School District
   Guilderland

8. Tax Map(s) and Identification
   [Information redacted]

9. Assessment Information
   [Information redacted]

10. Buyer Signature
    4/19/17

CERTIFICATION

[Signature]

[Note: Information on the form is true and correct to the best of my knowledge and belief.]

BUYER CONTACT INFORMATION

Bohl
Richard

Lake George
NY 12854

Malita
James

(518) 844-6664

BUYER'S ATTORNEY

[Information redacted]
February 1, 2019

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street Rm 710
Albany, NY 12207

Re: Application for Corrected Tax Roll
115-1-15
157 Woodstock Road, Westerlo, NY 12193

Dear Chairman Joyce,

Brian Crawford, Assessor for the Town of Berne, submitted an Application for Corrected Tax Roll for 157 Woodstock Road, Westerlo, NY. Due to clerical error, a 15% Senior Aged exemption was applied to the 2019 property tax bill. After review of the supporting documentation it appears the property owner is entitled to a 50% exemption.

It is my recommendation the 2019 property tax bill be amended to the corrected amount of $845.64.

Sincerely,

Maggie A. Alix, Director
Real Property Tax Service Agency

CC: Dennis Feeney, Majority Leader
    Frank Mauriello, Minority Leader
    Kevin Cannizzaro, Majority Counsel
    Minority Counsel
Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners
Robert McCann

Mailing address of owners (number and street or PO box)
157 Woodstock Rd

Location of property (street address)

City, village, or post office
Westerlo

State
NY

ZIP code
12193

Daytime contact number
518-872-0438

Evening contact number

Tax map number of section/block/lot: Property identification (see tax bill or assessment roll)
115-1-15

Account number (as appears on tax bill)

Amount of taxes currently billed

Reasons for requesting a correction to tax roll:
Clerical Error - Incorrect percentage applied to Aged All (41800) exemption. 15% used instead of 50%.

I hereby request a correction of tax levied by Town _____ (County, city, village, etc.) for the year(s) 2019.

Signature of applicant

Date
1/2/19

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls. If a Directed reinstatement, see instructions.

Date application received
01/7/19

Period of warrant for collection of taxes
01/01/19

Last day for collection of taxes without interest
01/31/19

Signature of official

Recommendation
Approve application [ ]

Deny application [ ]

Date
1/22/19

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Berne who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution (insert number or date, if applicable)

Application approved (mark an X in the applicable box):
Clerical error [X] Error in essential fact [ ] Unlawful Entry [ ] Directed reinstatement [ ]

Amount of taxes currently billed
1,249.12

Corrected tax
$8,153.04

Date notice of approval mailed to applicant

Date order transmitted to collecting officer

Application denied (reason):__

Signature of chief executive officer, or official designated by resolution

Date
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services): Authorization to Correct Tax Roll - Town of Berne.

Date: February 1, 2019
Submitted By: Maggie A. Alix
Department: Real Property Tax Service Agency
Title: Director
Phone: 518-487-5291
Department Rep.: Maggie A. Alix
Attending Meeting: Maggie A. Alix

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☐ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☒ Other: (state if not listed) Authorization to correct the tax roll in the Town of Berne

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed)

Contract Terms/Conditions:

Party (Name/address):
Click or tap here to enter text.

Additional Parties (Names_addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee:
Scope of Services:
Click or tap here to enter text.
Click or tap here to enter text.

Bond Res. No.:
Date of Adoption:
Click or tap here to enter text.
Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:
Yes ☐ No ☑

If Mandated Cite Authority:
Click or tap here to enter text.

Is there a Fiscal Impact:
Yes ☑ No ☐

Anticipated in Current Budget:
Yes ☑ No ☐
Justification: (state briefly why legislative action is requested)
157 Woodstock Road, Westerlo, NY

115.1-15

Due to clerical error, a 15% Senior Aged exemption was applied to the 2019 property tax bill. The Senior Aged exemption is income based. The assessor mistakenly used line 16a (pensions and annuities) in calculating the exemption, putting the property owner’s income into the threshold for a 15% exemption. After review of the supporting documentation, the correct number for the calculation comes off line 16b. It appears the property owner is entitled to a 50% exemption.

It is my recommendation the 2019 property tax bill be amended to the corrected amount of $845.64.
Maggie Alix, Director  
County of Albany  
112 State Street  
Real Property Tax Service Agency, Room 1300  
Albany, NY 12207

January 2, 2019

Re: Roll Correction  
Parcel No. 115.-1-15  
157 Woodstock Road

Dear Ms. Alix:

Enclosed with this letter is an application for a Corrected Tax Roll for Tax Map Parcel No. 115.-1-15. This parcel should have received an Aged All Exemption (41800) at 50%. Due to a clerical error 15% was applied to the parcel for the 2018 Assessment Roll.

This applies to the current Town & County tax bill. This is the same parcel that had a refund of taxes submitted to you in October 2018.

Robert McCann has a life estate use of this property.

If you have any questions, please contact our office at (518) 872-1448, ext. 107.

Sincerely,

[Brian Crawford, Chairman  
Assessor]

enclosures

cc: Exemption file  
Town of Berne  
R. McCann
TOWN OF BERNE
2019 PROPERTY TAXES

* For Fiscal Year 01/01/2019 to 12/31/2019
Warrant Date: 12/31/2018

MAKE CHECKS PAYABLE TO

TO PAY IN PERSON
BERNE TOWN HALL
JANUARY 5, 13, 19 & 26
9 AM to NOON
FEBRUARY AND MARCH:
BY APPOINTMENT

BILL NO. 000153
Sequence No. 161
Page No. 1 of 1

012000 115-1-15
Boice Patricia L
McCann Donald J
157 Woodstock Rd
Westerlo, NY 12193

PROPERTY TAXPAYER'S BILL OF RIGHTS

The assessor estimates the Full Market Value of this property as of July 1, 2017 was: $161,905.00
The Total Assessed Value of this property is: $134,600.00
The Uniform Percentage of Value used to establish assessments in your municipality is: 63.00

Exemption Value Tax Purpose Exemption Value Tax Purpose Exemption Value Tax Purpose
AGED - ALL 57,300 17-390 COUNTY 22,286 90,952
AGED - ALL 57,300 17-390 TOWN 22,286 90,952

PROPERTY TAXES

<table>
<thead>
<tr>
<th>Taxing Purpose</th>
<th>Taxable Assessed Value or Units</th>
<th>Rates per $1000</th>
<th>Tax Amount</th>
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<td>County Purposes</td>
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<tr>
<td>Town &amp; Highway</td>
<td>648.283 97.410.00</td>
<td>3.851056</td>
<td>$234.80</td>
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<tr>
<td>Highway</td>
<td>78.904 97.410.00</td>
<td>0.468721</td>
<td>$35.30</td>
</tr>
<tr>
<td>Heldenberg am dist</td>
<td>55.000</td>
<td>0.0</td>
<td>2.041246</td>
</tr>
<tr>
<td>Berne Fire district</td>
<td>338.854 114.600</td>
<td>2.041246</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL TAXES DUE BY JAN 31st

$1,249.72

Apply For Third Party Notification By: 11/01/2019

PAYMENT SCHEDULE

Pay By: Penalty/Interest Amount Total Due
01/31/2019 $0.00 $1,249.72 $1,249.72
02/28/2019 $124.49 845.49 $1,249.72
03/31/2019 $24.98 645.49 $1,249.72

TOWN OF: Berne
School: Berne-Knox-Westerlo
Property Address: 157 Woodstock Rd
Boice Patricia L
McCann Donald J
157 Woodstock Rd
Westerlo, NY 12193

RETURN THE ENTIRE BILL WITH PAYMENT AND PLACE A CHECK MARK IN THIS BOX [ ] IF YOU WANT A RECEIPT OF PAYMENT. THE RECEIVER'S STUB MUST BE RETURNED WITH PAYMENT.
Renewal Application for Partial Tax Exemption for Real Property of Senior Citizens

To be filed with your local assessor by taxable status date. Do not file this form with the Office of Real Property Tax Services.

Name and address:
012000  115-1-15
Patricia L. Bolce
Donald J. McCann
157 Woodstock Rd
Westerlo, NY 12193

Telephone number:
D.O.B 11/6/33
ASSessor's OFFICE
RECEIVED
D.O.B 11/6/33

1 Property identification (see tax bill or assessment roll)
   Tax map number or section/block/lot
   41800 - 126

2 Since filing your application last year, fully describe in the lines below any changes in:
   a title to the property (due to death, addition or deletion of owner);
   b legal residence or occupancy of the property (e.g. confinement of owner in hospital or nursing home, divorce, legal separation or abandonment by spouse); or
   c use of residence for other than residential purposes (store, office, farm, etc.).
   d Children of owners, tenants or leaseholders living on the premises attending public school grades pre-K-12; if so, give the name and location of the school or schools, and state whether such child or children were brought into the property in whole or in substantial part for the purpose of attending a particular school within the school district.

   Mark an X in the box if there has been no change in items, a, b, c and d above ................................................................. X

   Explanation of changes that have occurred as indicated on line 2 (attach additional sheets if necessary).
   

3 Did the owner or spouse file a federal or New York State income tax return for the preceding year?
   If Yes, attach a copy of the return(s) .............................................................................................................. Yes X No ☐

4 Provide the income of each owner and spouse of each owner for the calendar year immediately preceding the date of application on the following page, except for an owner who is absent from the residence due to divorce, legal separation or abandonment. Attach additional sheets if necessary.

   Income does not include:
   • gifts,
   • inheritances,
   • a return of capital,
   • proceeds of a reverse mortgage (although interest or dividends realized from the investment of such proceeds are income),
   • reparation payments to victims of Nazi persecution, or monies earned through employment in the Federal Foster Grandparent Program.

   If you received a STAR exemption on this property for the 2015-16 school year, this application will also serve as an application for the Enhanced STAR exemption. If not, you may be eligible for the Enhanced STAR credit, which is provided in the form of a check. To receive an Enhanced STAR check, you must register for it. For more information, visit www.tax.ny.gov/star or call (518) 457-2036.

   a Name of owner(s)  Source of Income  Amount of income

Robert McCann  SEE TAX DO C

Total income of owner(s) .................................................................
**Name of spouse(s) if not owner of property** | **Source of income of spouse(s)** | **Amount of income of spouse(s)**
--- | --- | ---
Income | 37,201 | 21,230
Medical | -8,249 | -1,125
| 28,952 | -1,273

**Total income of spouse(s)**: 18,442
**Total income of owner(s) and spouse(s)**: 36,060.00

b) Of the income in line a, how much, if any, was used to pay for an owner's care in a residential health care facility? Attach proof of amount paid; enter 0 if not applicable. (see instructions)

**

b)

b)


c) Line a minus line b

**

c)

c)

d) If a deduction for unreimbursed medical and prescription drug expenses is authorized by any of the municipalities in which property is located (contact assessor for information), complete the following:

(i) Medical and prescription drug costs;

(ii) Subtract amount of (i) paid or reimbursed by insurance

(iii) Unreimbursed amount of (i) (attach proof of expenses and reimbursement, if any; enter 0 if option not available);

Subtotal income of owner(s) and spouse(s) (line c minus line d, item (iii))

| (i) | -5,335.34 |
| (ii) | -2,714.11 |
| (iii) | 27,810.55 |

e) If a deduction for veteran's disability compensation is authorized by any of the municipalities in which the property is located, complete the following:

Veteran's disability compensation received. Attach proof; enter 0 if not applicable

| (i) |  |

Total income of owner(s) and spouse(s) (line d subtotal minus line e)

5 Certification

I (we) certify that all statements made on this application are true and correct to the best of my (our) belief. I (we) understand that any willful false statement of material fact will be grounds for disqualification from further exemption for a period of five years, and a fine of not more than $100.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Marital status</th>
<th>Phone number</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert J. &amp; Carol</td>
<td>Widowed</td>
<td>518-872-0628</td>
<td>2/15/18</td>
</tr>
</tbody>
</table>

**This Area for Assessor's Use Only**

Date renewal application filed: Approved ☐ Disapproved ☐

Exemption applies to taxes levied by or for:

City/Town: % ☐ County: % ☐

School: % ☐ Village: % ☐

Assessor's signature: Date: 
February 1, 2019

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Rm 710
Albany, NY 12207

Re: RP-554 — Application for Corrected Tax Roll
265 SR 143, Westerlo, NY
139-2-22

Dear Chairman Joyce:

Peter Hotaling, the assessor for the Town of Westerlo, submitted an Application for Corrected Tax Roll on behalf of the owner of the aforementioned property. Due to a clerical error, a water district unit charge was applied to the property inadvertently. The Town of Westerlo reviewed the properties water district description and determined the property is not in the water district and the charge is unwarranted.

Please see the enclosed documentation, it is my recommendation that the 2019 property tax bills be corrected. The correct tax amount is $1,323.52.

Sincerely,

Maggie A. Alix, Director
Real Property Tax Service Agency

CC: Dennis Feeny, Majority Leader
Frank Mauriello, Minority Leader
Kevin Cannizzaro, Majority Counsel
Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Authorization to Correct Tax Roll - Town of Westerlo

Date: February 1, 2019
Submitted By: Maggie A. Alix
Department: Real Property Tax Service Agency
Title: Director
Phone: 518-487-5291
Department Rep.
Attending Meeting: Maggie A. Alix

Purpose of Request:

☐ adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☐ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☒ Other: (state if not listed) Authorization to Correct Tax Roll - Town of Westerlo

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline Click or tap to enter a date.

☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address): Click or tap here to enter text.
Additional Parties (Names/addresses): Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.
Scope of Services: Click or tap here to enter text.

Bond Res. No.: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes ☐ No ☒
If Mandated Cite Authority:

Is there a Fiscal Impact: Yes ☒ No ☐
Anticipated in Current Budget: Yes ☐ No ☒
<table>
<thead>
<tr>
<th>County Budget Accounts:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue Account and Line:</td>
<td>Click or tap here to enter text.</td>
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</tr>
<tr>
<td>Revenue Amount:</td>
<td>Click or tap here to enter text.</td>
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</tr>
<tr>
<td>Appropriation Account and Line:</td>
<td>Click or tap here to enter text.</td>
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<tr>
<td>Appropriation Amount:</td>
<td>Click or tap here to enter text.</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Source of Funding - (Percentages)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal:</td>
<td>Click or tap here to enter text.</td>
<td></td>
</tr>
<tr>
<td>State:</td>
<td>Click or tap here to enter text.</td>
<td></td>
</tr>
<tr>
<td>County:</td>
<td>Click or tap here to enter text.</td>
<td></td>
</tr>
<tr>
<td>Local:</td>
<td>Click or tap here to enter text.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Term</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Term: (Start and end date)</td>
<td>Click or tap here to enter text.</td>
<td></td>
</tr>
<tr>
<td>Length of Contract:</td>
<td>Click or tap here to enter text.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Impact on Pending Litigation</th>
<th>Yes ☐ No ☒</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes, explain:</td>
<td>Click or tap here to enter text.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Previous requests for Identical or Similar Action:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Resolution/Law Number:</td>
<td>Click or tap here to enter text.</td>
<td></td>
</tr>
<tr>
<td>Date of Adoption:</td>
<td>Click or tap here to enter text.</td>
<td></td>
</tr>
</tbody>
</table>

**Justification:** (state briefly why legislative action is requested)

265 SR 143, Westerlo, NY

139-2-22

Due to a clerical error, a water district unit charge was applied to the property inadvertently. The Town of Westerlo reviewed the properties water district description and determined the property is not in the water district and the charge is unwarranted.

It is my recommendation that the 2019 property tax bills be corrected. The correct tax amount is $1,323.52, a difference of $314.61.
Application for Corrected Tax Roll

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners
Chester & Marieita

Mailing address of owner (number and street or PO box)  
265 SR 143

Location of property (street address)  
Westerlo

City, village, or post office  
State  
NY  
ZIP code  
12193

Daytime contact number  
518-797-3113

Evening contact number
Tax map number of section/township: Property identification (see tax bill or assessment roll)
1391-2-22

Account number (as appears on tax bill)  
232

Amount of taxes currently billed  
1,638.13

Reasons for requesting a correction to tax roll:
Clerical Error 2(e) An incorrect Unit entry in a Special District (WR001 Westerlo Water District). Parcel is not in the Water District. Water District. There should be no Units on this parcel.

I hereby request a correction of tax levied by Town of Westerlo for the year(s) 2019.

(County, city, village, etc.)

Signature of applicant

Date 1/19/19

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls. If a Directed reinstatement, see instructions.

Date application received 1/14/19

Period of warrant for collection of taxes 03/31/19

Last day for collection of taxes without interest

Recommendation

Approve application

Deny application

Signature of official  

Date 1/28/19

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Westerlo who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution (insert number or date, if applicable).

Application approved (mark an X in the applicable box):
Clerical error □  Error in essential fact □  Unlawful Entry □  Directed reinstatement □

Amount of taxes currently billed 1,638.13

Corrected tax $1,323.52

Date notice of approval mailed to applicant

Date order transmitted to collecting officer

Application denied (reason):

Signature of chief executive officer, or official designated by resolution

Date
February 1, 2019

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Rm 710
Albany, NY 12207

Re: RP-554 — Application for Corrected Tax Roll
265 SR 143, Westerlo, NY
139.2-22

Dear Chairman Joyce:

Peter Hotaling, the assessor for the Town of Westerlo, submitted an Application for Corrected Tax Roll on behalf of the owner of the aforementioned property. Due to a clerical error, a water district unit charge was applied to the property inadvertently. The Town of Westerlo reviewed the properties water district description and determined the property is not in the water district and the charge is unwarranted.

Please see the enclosed documentation, it is my recommendation that the 2019 property tax bills be corrected. The correct tax amount is $1,323.52.

Sincerely,

Maggie A. Alix, Director
Real Property Tax Service Agency

CC: Dennis Fesny, Majority Leader
    Frank Mauriello, Minority Leader
    Kevin Cannizzaro, Majority Counsel
    Minority Counsel
January 9, 2019

Albany County Director of Real Property
Maggie Alix
112 State Street Room 800
Albany NY 12207

RE: #139-2-22
Dear Maggie,

On January 8, 2019, Mr. Brush located in the T/O Westerlo at 265 CR SR 143 came in to question a Water District Unit charge on his 2019 Tax Bill when he is not in the Water District.

Upon review of the Approved Water District List our office was given in December 2018 this parcel was included. Upon review of the Water District Descriptions his property is not in the Water District and should not have been a charged a Unit.

I request a corrected Tax Bill sent without penalties under a RP-554 be processed under (RP 550-Clerical error (2) e).

Enclosed you will find 2 copies of the RP 554 application, snapshot of RPS 2018 incorrect & corrected screens, and a copy of Unpaid 2019 Town/County Tax bill.

Yours truly,

[Signature]

Peter Hotaling
Sole Assessor
Town of Westerlo
ALBANY COUNTY, TOWN OF WESTERLO
2019 PROPERTY TAX BILL
For Fiscal Year 3/1/2019 to 12/31/2019
Warrant Date 12/31/2018

MAIL and MAKE CHECKS PAYABLE TO
TOWN OF WESTERLO
TAX COLLECTOR
PO BOX 148, 533 GIL 401
WESTERLO, NY 12193
518-797-3111

TO PAY IN PERSON
GREN维尔LE BRANCH ONLY
NATIONAL BANK OF COXSACKIE
4894 STATE ROUTE 81
GREN维尔LE, NY 12033

013800 139-2-22
Brush Chester
Brush Marietta
265 Sr 143
Westerlo, NY 12193

PROPERTY TAXPAYER'S BILL OF RIGHTS
The assessor estimates the Full Market Value of this property as of July 1, 2018 was: $160,000.00.
The Total Assessed Value of this property is: $1,600.00.
The Uniform Percentage of Value used to establish assessments in your municipality was: 1.00.

If you feel your assessment is too high, you have the right to seek a reduction in the future. For further information, please ask your assessor for the booklet "How to File a Complaint on Your Assessment." Please note that the period for filing complaints on the above assessment has passed.

<table>
<thead>
<tr>
<th>Exemption</th>
<th>Value</th>
<th>Tax Purpose</th>
<th>Est Full Value</th>
<th>Exemption</th>
<th>Value</th>
<th>Tax Purpose</th>
<th>Est Full Value</th>
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</table>

PROPERTY TAXES

<table>
<thead>
<tr>
<th>Taxing Purpose</th>
<th>Total Tax Levy</th>
<th>% Levy Change from Prior Year</th>
<th>Taxable Assessed Value or Units</th>
<th>Rates per $1000</th>
<th>Tax Amount</th>
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</thead>
<tbody>
<tr>
<td>County Purposes</td>
<td>997,991</td>
<td>-4.1</td>
<td>1,600.00</td>
<td>363.038572</td>
<td>$582.30</td>
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<tr>
<td>General Town Wide</td>
<td>647,133</td>
<td>6.7</td>
<td>1,600.00</td>
<td>235.629809</td>
<td>$377.01</td>
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<tr>
<td>Highway Town Wide</td>
<td>354,341</td>
<td>0.0</td>
<td>1,600.00</td>
<td>121.738044</td>
<td>$194.78</td>
</tr>
<tr>
<td>Westerlo fire dist TOTAL M</td>
<td>219,303</td>
<td>-5.0</td>
<td>1,600.00</td>
<td>75.557654</td>
<td>$120.91</td>
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<tr>
<td>Westerlo rescue TOTAL M</td>
<td>86,000-12.0</td>
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<td>1,600.00</td>
<td>30.323131</td>
<td>$48.52</td>
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<tr>
<td>Westerlo water dist UNITS</td>
<td></td>
<td></td>
<td>1.00</td>
<td>314.606741</td>
<td>$314.61</td>
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</table>

PAYMENT SCHEDULE

<table>
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<tr>
<th>Pay By:</th>
<th>Penalty/Interest</th>
<th>Total Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/28/2019</td>
<td>$16.38</td>
<td>$1,654.51</td>
</tr>
<tr>
<td>04/01/2019</td>
<td>$32.76</td>
<td>$1,670.89</td>
</tr>
</tbody>
</table>

TOTAL TAXES DUE BY 1/31/19

$1,638.13

Apply For Third Party Notification By: 11/15/2019

Taxes paid by CA CH

RECEIVER'S STUB MUST BE RETURNED WITH PAYMENT.
IF YOU WANT A RECEIPT, RETURN ENTIRE BILL.

2019 PROPERTY TAX

<table>
<thead>
<tr>
<th>Town Of:</th>
<th>WESTERLO</th>
</tr>
</thead>
<tbody>
<tr>
<td>School:</td>
<td>Greeneville Central</td>
</tr>
<tr>
<td>Property Address:</td>
<td>265 Sr 143</td>
</tr>
<tr>
<td>Pay By:</td>
<td>Penalty/Interest</td>
</tr>
<tr>
<td>02/28/2019</td>
<td>$16.38</td>
</tr>
<tr>
<td>04/01/2019</td>
<td>$32.76</td>
</tr>
</tbody>
</table>

TOTAL TAXES DUE

BY 1/31/2019

$1,638.13
Mr. Chester Brush came into the Town of Westerlo Tax Collector's office with his 2019 Town of Westerlo Property Tax Bill 000232 and informed my office that he is not in the Westerlo Water District No. 1. Upon reviewing the tax bill it included the Westerlo Water District (Bond Payment) amount of $314.61. Mr. Brush's property is not within the geographic boundaries of Westerlo Water Water District No. 1. His tax bill should not have included this amount.

In 2018 the Westerlo Water District No. 1 added an extension to the District to include:
Windy Hill Properties
SBL # 139.9-2-22
Location 560 State Route 143
Tax bill # 001986 included the $314.61 Water District bond

Since the SBL#s are off by one digit the error may have when the Assessor's office had to include the addition to the water district.

If you have any further questions please contact either the Assessor or myself, thank you.

Sincerely

Kathleen Spinnato
Westerlo Town Clerk/Tax Collector

--- Original Message ---
From: Alix. Alix Alix. Alix
To: Westerlo Assessor
Sent: Monday, January 28, 2019 10:19 AM
Subject: Correction - 265 SR 143

Hi Peter,

I am processing the correction for 265 SR 143. In your narrative, you state your office was given an approved water district list. Could whoever gave you the list, send a quick email acknowledging the error and state the property is NOT in the water district?

Thanks, Maggie

Maggie A. Alix, Director
Real Property Tax Service Agency
Albany County
112 State Street, Room 1340
518-487-5291
518-447-2503 (fax)

Confidentiality Notice: This fax/e-mail transmission, with accompanying records, is intended only for the use of the individual or entity to which it is addressed and may contain confidential and/or privileged information belonging to the sender, including individually identifiable health information subject to the privacy and security provisions of HIPAA. This information may be protected by pertinent privilege(s), e.g., attorney-client, doctor-patient, HIPAA etc., which will be enforced to the fullest extent of the law. If you are not the intended recipient, you are hereby notified that any examination, analysis, disclosure, copying, dissemination, distribution, sharing, or use of the information in this transmission is strictly prohibited. If you have received
February 1, 2019

Honorable Andrew Joyce, Chairman  
Albany County Legislature  
112 State Street, Rm 710  
Albany, NY 12207  

Re: RP-554 — Application for Corrected Tax Roll  
36 Marsdale Street  
64.79-2-44

Dear Chairman Joyce,

Trey Kingston, the assessor for the City of Albany, submitted an Application for Corrected Tax Roll on behalf of the Parish of Mater Christi. The Parish of Mater Christi applied for a not for profit exemption before March 1, 2018. Due to clerical error the parcel was not coded with an exemption code, therefore, appeared as taxable on the 2018 assessment roll. The parcel should appear in Roll Section 8, wholly exempt.

Please see the enclosed documentation, it is my recommendation that the 2019 property tax bills be negated.

Sincerely,

Maggie A. Alix, Director  
Real Property Tax Service Agency

CC: Dennis Feeny, Majority Leader  
Frank Mauro, Minority Leader  
Kevin Cannizzaro, Majority Counsel  
Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services): Authorization to Correct Tax Roll - City of Albany

Date: February 1, 2019
Submitted By: Maggie A. Alix
Department: Real Property Tax Service Agency
Title: Director
Phone: 518-487-5291
Department Rep.
Attending Meeting: Maggie A. Alix

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☐ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☒ Other: (state if not listed) Authorization to Correct Tax Roll - City of Albany

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant
  Choose an item.
  Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed)  Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):
  Click or tap here to enter text.

Additional Parties (Names/addresses):
  Click or tap here to enter text.

Amount/Raise Schedule/Fee:
  Click or tap here to enter text.
Scope of Services:
  Click or tap here to enter text.

Bond Res. No.:
  Click or tap here to enter text.
Date of Adoption:
  Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:
  Yes ☐ No ☒
If Mandated Cite Authority:
  Click or tap here to enter text.

Is there a Fiscal Impact:
  Yes ☒ No ☐
Anticipated in Current Budget:
  Yes ☐ No ☒
County Budget Accounts:
Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.
Appropriation Account and Line: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)
Federal: Click or tap here to enter text.
State: Click or tap here to enter text.
County: Click or tap here to enter text.
Local: Click or tap here to enter text.

Term
Term: (Start and end date) Click or tap here to enter text.
Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation
Yes ☐ No ☒
If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:
Resolution/Law Number: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)
36 Marsdale Street
64.79-2-44

The Parish of Mater Christi applied for a not for profit exemption before March 1, 2018. Due to clerical error the parcel was not coded with exemption code 25110, therefore, appeared as taxable on the 2018 assessment roll. The parcel should appear in Roll Section 8, wholly exempt.

It is my recommendation that the 2019 property tax bills be negated.
Part 1 – General Information: To be completed in duplicate by the applicant.

Names of owners
Parish of Mater Christi
Mailing address of owners (number and street or PO box) Location of property (street address)
40 Hopewell St. 36 Marseile St.
City, village, or post office State ZIP code City, town, or village State ZIP code
Albany NY 12208 Albany NY 12208
Daytime contact number Evening contact number Tax map number of section/block/lot: Property identification (see tax bill or assessment roll)
518-463-8623 64.79-2-44
Account number (as appears on tax bill) Amount of taxes currently billed
24632 2,525.75

Reasons for requesting a correction to tax roll:
Error was found where application was received before taxable status date of March 1, 2018 (was filed in August of 2017). Correction was made for School taxes. BAR failed to take action in September 2018 and once realized, we were unable to get a quorum to rectify for property tax purposes.

I hereby request a correction of tax levied by City/County of Albany for the year(s) 2019.

(County, city, village, etc.)

Signature of applicant
Date 1/30/19

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls. If a Directed reinstatement, see instructions.

Date application received 1/30/19 Period of warrant for collection of taxes 3/31/19
Last day for collection of taxes without interest 1/31/19
Signature of official 1/31/19
Recommendation
Approve application Ø Deny application Ø
If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of Albany, who must consider the attached report and recommendation as equivalent of petitions filed under section 555.

Part 3 – For use by the tax levying body or official designated by resolution:

Application approved (mark an X in the applicable box):
Clerical error Ø Error in essential fact Ø Unlawful Entry Ø Directed reinstatement Ø

Amount of taxes currently billed 2,525.75 Corrected tax

Date notice of approval mailed to applicant
Date order transmitted to collecting officer

Application denied (reason):

Signature of chief executive officer, or official designated by resolution
Date
February 1, 2019

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Rm 710
Albany, NY 12207

Re: RP-554 – Application for Corrected Tax Roll
36 Marsdale Street
64.79-2-44

Dear Chairman Joyce,

Trey Kingston, the assessor for the City of Albany, submitted an Application for Corrected Tax Roll on behalf of the Parish of Mater Christi. The Parish of Mater Christi applied for a not for profit exemption before March 1, 2018. Due to clerical error the parcel was not coded with an exemption code, therefore, appeared as taxable on the 2018 assessment roll. The parcel should appear in Roll Section 8, wholly exempt.

Please see the enclosed documentation, it is my recommendation that the 2019 property tax bills be negated.

Sincerely,

Maggie A. Aix, Director
Real Property Tax Service Agency

CC: Dennis Feeny, Majority Leader
Frank Mauriello, Minority Leader
Kevin Cannizzaro, Majority Counsel
Minority Counsel
Instructions

General Information

Where to send
Submit two copies of this application to the County Director of Real Property Tax Services (in Nassau and Tompkins Counties, submit to Chief Assessing Officer).

When to send
Submit the application only before the collection warrant expires.

Wholly exempt parcel
Attach statement signed by assessor or majority of board of assessors substantiating that assessor obtained proof that parcel should have been granted tax exempt status on tax roll.

Directed reinstatement
Indicate the type of error only for an Enhanced STAR Exemption or a senior citizens exemption that is being reinstated under the good cause authorization of Real Property Tax Law (RPTL) sections 425(6)(a-2) or 467(b-a). In such a case, the written report of the county director or village assessor must indicate that there has been a good cause finding, and a copy of the written report must be attached to this form.

Payment requirements
You may pay without interest and penalties only if:
• the application was filed with the County Director on or before the last day that taxes may be paid without interest (see Date application received in Part 2); and
• you pay the corrected tax within eight days of the date on which the notice of approval is mailed to the applicant (see Part 3).

If either of these conditions is not satisfied, interest, penalties, or both must be paid on the corrected tax.

For use by Collecting Officer:

Order from tax levying body received on __________ Date

<table>
<thead>
<tr>
<th>Corrected tax due</th>
<th>Date tax roll corrected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest and penalties (if applicable)</td>
<td>Date tax bill corrected</td>
</tr>
<tr>
<td>Total corrected tax due</td>
<td>Date application and order added to tax roll</td>
</tr>
<tr>
<td>Date payment received</td>
<td></td>
</tr>
</tbody>
</table>

Signature of collecting officer __________ Date
CITY OF ALBANY - 2019 PROPERTY TAXES

FISCAL YEAR: 1/1/2019 to 12/31/2019
WARRANT: 12/31/2018
ESTIMATED COUNTY STATE AID: $90,121,585

MAKE CHECKS PAYABLE TO:
CITY OF ALBANY

TO PAY IN PERSON:
City Hall Room 110
24 Eagle Street
Albany, NY 12207
(518) 434-8035

PROPERTY INFORMATION:
ACCOUNT #: 24832
DIMENSION: 81.37 X 125
ROLL: 1
LOCATION: 38 Marsdale St
SCHOOL: 010100
FULL MARKET VALUE: 175,000
UNIFORM % OF VALUE: 100.00%
LAND ASSESSMENT: 175,000
TOTAL ASSESSMENT: 175,000

PROPERTY OWNER:
Parish Of Mater Christi
40 Hopewell St
Albany, NY 12208

PROPERTY TAX PAYERS BILL OF RIGHT
If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION | TOTAL TAX LEVY | % CHANGE FROM PRIOR YEAR LEVY | TAXABLE VALUE OR UNITS | RATE | TAX AMOUNT
--- | --- | --- | --- | --- | ---
County Tax | 17,417,764 | -1.6% | 124,000 | 3.574759 | 252.59
City Tax | 58,550,000 | 0.0% | 124,000 | 10.859100 | 1,900.17
TOTAL BASE TAXES DUE: | $2,525.75

Date Paid | Amount Paid
--- | ---
$0.00

Pay By 1/31/2019
Tax Amount | Interest | Total Due
--- | --- | ---
$2,525.75 | $0.00 | $2,525.75

TOTAL DUE: $2,525.75
APPLICATION FOR REAL PROPERTY TAX EXEMPTION FOR NONPROFIT ORGANIZATIONS - MANDATORY CLASS I - ORGANIZATION PURPOSE

(See general information and instructions on back of form)

Parish of Mater Christi
1a. Name of Organization
40 Hopewell St.

Lori Chera
d. Name of contact person
518-453-5623
e. Day telephone no. of contact person

Albany, NY 12209
b. Mailing address
27-0221761

c. Employer ID no.

f. E-mail address (optional)

Evening telephone no.
lori.chera@rcda.org

2a. Purpose(s) of organization:

☐ Religious
☐ Charitable
☐ Educational
☐ Moral or mental improvement of men, women, or children
☐ Hospital

b. If the organization has more than one purpose, state the primary purpose: Religious


c. State briefly specific activities related to each purpose checked above:
The activities of the Parish of Mater Christi are exclusively and entirely religious, including religious services and devotions, counselling and guidance, educational programs at all levels, and charitable programs to serve varied needs of the community of the church, including spiritual, economic and personal needs.

(Attach additional sheets if necessary)

FOR ASSESSOR'S USE

Assessing unit ____________________________ County ____________________________
City/Town ____________________________ Village ____________________________
School District ____________________________
3. Is the organization currently exempt from Federal income tax? □ Yes □ No
   If no, skip to question 4. If yes, answer a. through d.
   a. Under which section, subsection and paragraph of the Internal Revenue Code? 501(c)(3)
   b. Did the Internal Revenue Service recognize the exemption on the basis of an application form or a written request or statement? □ Yes □ No
   If yes: (1) Was the exemption recognized by a (check one)
       □ Group exemption letter
       □ Separate exemption letter
   (2) If exemption was recognized by a group exemption letter, give name and address of organization receiving group exemption. United States Catholic Conference
       3211 Fourth Street, N.E., Washington, D.C. 20017
   (3) If the exemption was recognized by an advanced ruling, when does the ruling expire?
       n/a
       (month/day/year)

ATTACH COPY OF DETERMINATION OR RULING LETTER
   If no: (4) Please explain how the organization is exempt from Federal income tax (attach additional sheets if needed).

ATTACH COPY OF EACH RETURN FILED FOR THE ORGANIZATIONS LAST FISCAL YEAR
   d. For the last fiscal year, did the organization file Internal Revenue Form 990-T (Exempt Organization Business Income Tax Return)? □ Yes □ No
      IF YES ATTACH COPY OF FORM 990-T AND SKIP TO QUESTION 5

4. Has the organization applied for recognition of exemption from Federal income tax? □ Yes □ No
   a. Under which section, subsection and paragraph of the Internal Revenue Code?
   b. Date of application

ATTACH COPY OF APPLICATION, REQUEST OR STATEMENT AND ATTACHMENTS
   IF NO, COMPLETE AND ATTACH SCHEDULE A (RP-420-a/Org) (obtain Sch. A from assessor)

5. Is the organization incorporated? □ Yes □ No
   If yes, answer a. through c. If no, answer d. through f.
a. Date incorporated 9/25/2009  

b. State/County in which incorporated NY/Albany  
c. Under which law? Law: Religious Corporation Law  
Article or section: Article 5, Section 90  

ATTACH COPY OF CURRENT ARTICLES OF INCORPORATION (Note: If a dissolution provision is not included in the articles, also attach a statement describing how assets would be distributed should the organization dissolve.)

d. Form of organization  

e. Date formed  

f. Has the organization applied for incorporation? [ ] Yes [ ] No - If no, skip to question 6. If yes:

(1) State/County in which application has been filed  

(2) Under which Law? Law:  
Article or section:  

(3) Date application filed:  

ATTACH COPY OF APPLICATION AND CONSENTS REQUIRED WITH APPLICATION

ATTACH COPY OF CURRENT ARTICLES OF ORGANIZATION (Note: If a dissolution provision is not included in the articles, also attach a statement describing how assets would be distributed should the organization dissolve.)

6. Is the organization under the supervision of any public regulatory body? [ ] Yes [ ] No  
If yes, answer a through c.

a. Which one(s)? Give name and address  

b. Does the organization have an operating certificate, permit, charter, or similar authorization issued by a public regulatory body? [ ] Yes [ ] No

IF YES, ATTACH COPY OF AUTHORIZATION

c. Does the organization solicit contributions from the public? [ ] Yes [ ] No  
If yes and the organization is registered with the Attorney General's Charities Bureau, give the organization's registration number  

VERIFICATION

State of New York  

County of Albany  

Paul Ehrmann, being duly sworn, says that he is the Authorized Rep of the applicant organization, that the statements contained in this application (including the attached sheets consisting of 3 pages) are true, correct and complete, and that he makes this application for real property tax exemption as provided by law.

Signature of owner or authorized representative  

Subscribed and sworn to before me this 1st day of August, 2017  

Commissioner of deeds or notary public  

Signature of owner or authorized representative  

Notary Public-State of New York  

NO. 01DA0683124  

QUALIFIED IN ALBANY COUNTY  
MY COMMISSION EXPIRES 08-27-2017
February 1, 2019

Honorable Andrew Joyce, Chairman
Albany County Legislature
112 State Street Rm 710
Albany, NY 12207

Re: Application for Refund of Real Property Taxes
80-14-1-20
90 Dyer Road, East Berne, NY 12059

Dear Chairman Joyce,

Brian Crawford, Assessor for the Town of Berne, submitted an Application for Refund of Real Property Taxes for 90 Dyer Road, East Berne, NY. Due to clerical error, a 15% Senior Aged exemption was applied to the 2019 property tax bill. After review of the supporting documentation it appears the property owner is entitled to a 30% exemption. The tax bill was paid in full on January 2, 2019.

It is my recommendation the property owner receive a refund in the amount of $170.49.

Sincerely,

Maggie A. Alix, Director
Real Property Tax Service Agency

CC: Dennis Feeny, Majority Leader
    Frank Mauriello, Minority Leader
    Kevin Cannizzaro, Majority Counsel
    Minority Counsel
Part 1 – General information: To be completed in duplicate by the applicant.

<table>
<thead>
<tr>
<th>Names of owners</th>
<th>Location of property (street address)</th>
</tr>
</thead>
<tbody>
<tr>
<td>William J. Roemer, Jr.</td>
<td>90 Dyer Road</td>
</tr>
<tr>
<td>Mailing address of owners (number and street or PO box)</td>
<td>City, town, or village State ZIP code</td>
</tr>
<tr>
<td>PO Box 93</td>
<td>East Berne NY 12059</td>
</tr>
<tr>
<td>City, village, or post office</td>
<td>State  ZIP code</td>
</tr>
<tr>
<td>East Berne</td>
<td>East Berne NY 12059</td>
</tr>
<tr>
<td>Daytime contact number</td>
<td>Evening contact number</td>
</tr>
<tr>
<td>518-368-4530</td>
<td>518-368-4530</td>
</tr>
<tr>
<td>Account number (as appears on tax bill)</td>
<td>Date of payment</td>
</tr>
<tr>
<td>80.14-1-20</td>
<td>80.14-1-20</td>
</tr>
</tbody>
</table>

Reasons for requesting a refund or credit:
Clerical Error - Incorrect percentage applied to Aged All exemption (41800).

I hereby request a refund or credit of real property taxes levied by Town of Berne (County, city, village, etc.) for the year(s) 2019.

Signature of Applicant Date: 1-9-19

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls. If a Directed reinstatement, see instructions.

<table>
<thead>
<tr>
<th>Date application received</th>
<th>Date warrant annexed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/10/19</td>
<td>3/31/19</td>
</tr>
</tbody>
</table>

Last day for collection of taxes without interest 1/31/19

Recommendation
Approve application* Deny application

Signature of official Date: 1/22/19

* If this application is approved, and the same error appears on a current assessment roll, send a copy of this form, including all attachments, to the assessor and board of assessment review. They must treat this application as a petition for the correction of that current roll (Form RP-553).

Part 3 – For use by the tax levying body or official designated by resolution (insert number or date, if applicable)

Application approved (Mark an X in the applicable box):
Clerical error ☒ Error in essential fact ☐ Unlawful Entry ☐ Directed reinstatement ☐

Amount of taxes paid $1,231.67 Amount of taxes due $1,061.18 Amount of refund or credit $170.49

Application denied (reason):

Signature of chief executive officer or official designated by resolution Date
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Authorization for a Refund of Real Property Taxes - Town of Berne

Date: February 1, 2019
Submitted By: Maggie A. Alix
Department: Real Property Tax Service Agency
Title: Director
Phone: 518-487-5291
Department Rep.
Attending Meeting: Maggie A. Alix

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☐ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☒ Other: (state if not listed) Authorization to issue a refund of real property taxes in the Town of Berne - 90 Over Road.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee:
Scope of Services:
Click or tap here to enter text.
Click or tap here to enter text.

Bond Res. No.:
Date of Adoption:
Click or tap here to enter text.
Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes ☐ No ☒
If Mandated Cite Authority:
Click or tap here to enter text.

Is there a Fiscal Impact:
Yes ☒ No ☐
Anticipated in Current Budget:
Yes ☐ No ☒
Justification: (state briefly why legislative action is requested)
90 Dyer Road, East Berne, NY
80.-14-1-20

Due to clerical error, a 15% Senior Aged exemption was applied to the 2019 property tax bill. After review of the supporting documentation it appears there was an error in calculating the income for the aged exemption. The property owner is entitled to a 30% exemption. The tax bill was paid in full on January 2, 2019. It is my recommendation the property owner receive a refund in the amount of $170.49.
Town of Berne

Maggie Alix, Director
County of Albany
112 State Street
Real Property Tax Service Agency, Room 1300
Albany, NY 12207

January 2, 2019

Re: Correction of Error
   Parcel No. 80.14-1-20
   90 Dyer Road

Dear Ms. Alix:

Enclosed with this letter is an application for a Corrected Tax Roll for Tax Map Parcel No. 80.14-1-20. This parcel should have received an Aged All Exemption (41800) at 30%. Due to a clerical error 15% was applied to the parcel for the 2018 Assessment Roll.

This applies to the current Town & County tax bill. This is the same parcel that had a refund of taxes submitted to you in October 2018.

If you have any questions, please contact our office at (518) 872-1448, ext. 107.

Sincerely,

Brian Crawford, Chairman
Assessor

enclosures

cc: Exemption file
    Town of Berne
    W. Roemer
Print Bill

Collection: Town & County 2019
Fiscal Year Start: 1/1/2019
Fiscal Year End: 12/31/2019
Warrant Date: 12/31/2018

Total Tax Due (minus penalties & interest)  $0.00

<table>
<thead>
<tr>
<th>Entered</th>
<th>Posted</th>
<th>Total</th>
<th>Tax Amount</th>
<th>Penalty</th>
<th>Surcharge</th>
<th>Via</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/9/2019</td>
<td>1/9/2019</td>
<td>$1,231.67</td>
<td>$1,231.67</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Mail</td>
<td>Full Payment</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tax Bill #</th>
<th>SWIS</th>
<th>Tax Map #</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>001490</td>
<td>012000</td>
<td>80.14-1-20</td>
<td>Payment Posted</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>Municipality</th>
<th>School</th>
</tr>
</thead>
<tbody>
<tr>
<td>90 Dyer Rd</td>
<td>Town of Berne</td>
<td>Berne-Knox-Westrio</td>
</tr>
</tbody>
</table>

Owners
Roemer William J Jr
PO Box 93
East Berne, NY 12059

Property Information
Roll Section: 1
Property Class: 1 Family Res
Lot Size: 72.25' x 130.50'

Assessment Information
Full Market Value: 179365.00
Total Assessed Value: 113000.00
Uniform %: 63.00

Exemption
<table>
<thead>
<tr>
<th>Exemption</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGED - ALL</td>
<td>33,900</td>
</tr>
<tr>
<td>AGED - ALL</td>
<td>33,900</td>
</tr>
</tbody>
</table>

Description            | Tax Levy | Percent Change | Taxable Value | Rate | Tax Amount |
------------------------|----------|----------------|---------------|------|-----------|
County Purposes         | 956515   | -0.5000        | 79,198,906.00 | 5.73 | 551,299   |
Town & Highway 2,3,4    | 648283   | 7.5000         | 79,198,906.00 | 3.85 | 369,899   |
Highway 1               | 78904    | -35.6000       | 79,198,906.00 | 0.46 | 35,582    |
Helderberg amb dist     | 55000    | 0.0000         | 113,000.00    | 0.30 | 34,810    |
Berne fire district     | 358854   | 0.0000         | 113,000.00    | 2.04 | 230,656   |

Total Taxes: $4,423,67

Estimated State Aid - Type
<table>
<thead>
<tr>
<th>County</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>90121595.00</td>
</tr>
</tbody>
</table>

Mail Payments To:
Gerald J. O'Malley
Tax Collector
311 Long Rd. East Berne, NY 12059

https://egov.basgov.com/berne/iTax_bill.aspx?75xy1pMkQlv9ck7FwudiFnYxxdm9XPjQ  1/22/2019
<table>
<thead>
<tr>
<th>Exemption Code</th>
<th>Description</th>
<th>Amount</th>
<th>Term Date</th>
<th>Owner/Year</th>
<th>Exempted Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>41800</td>
<td>AGED-ALL</td>
<td>16,950</td>
<td>1-15-2014</td>
<td></td>
<td>53,300</td>
</tr>
<tr>
<td>41634</td>
<td>ENR-STAR</td>
<td>42,750</td>
<td>2009</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Taxable Value</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>County</td>
<td>96,050</td>
</tr>
<tr>
<td>School</td>
<td>56,050</td>
</tr>
<tr>
<td>Sch/Net STAR</td>
<td>53,300</td>
</tr>
</tbody>
</table>
Renewal Application for Partial Tax Exemption for Real Property of Senior Citizens

To be filed with your local assessor by taxable status date. Do not file this form with the Office of Real Property Tax Services.

1. Property Identification (see tax bill or assessment roll)
   Tax map number or section/block/lot.

2. Since filing your application last year, fully describe in the lines below any changes in:
   a. title to the property (due to death, addition or deletion of owner);
   b. legal residence or occupancy of the property (e.g. confinement of owner in hospital or nursing home, divorce, legal separation or abandonment by spouse);
   c. use of residence for other than residential purposes (store, office, farm, etc.).
   d. Children of owners, tenants or leaseholders living on the premises attending public school grades pre-K-12; if so, give the name and location of the school or schools, and state whether such child or children were brought into the property in whole or in substantial part for the purpose of attending a particular school within the school district.

Mark an X in the box if there has been no change in items, a, b, c and d above.

Explanation of changes that have occurred as indicated on line 2 (attach additional sheets if necessary).

3. Did the owner or spouse file a federal or New York State income tax return for the preceding year?
   If Yes, attach a copy of the return(s).
   Yes ☒ No ☐

4. Provide the income of each owner and spouse of each owner for the calendar year immediately preceding the date of application on the following page, except for an owner who is absent from the residence due to divorce, legal separation or abandonment.
   Attach additional sheets if necessary.

   Income does not include:
   • gifts,
   • inheritances,
   • a return of capital,
   • proceeds of a reverse mortgage (although interest or dividends realized from the investment of such proceeds are income),
   • reparation payments to victims of Nazi persecution, or monies earned through employment in the Federal Foster Grandparent Program.

   If you received a STAR exemption on this property for the 2015-16 school year, this application will also serve as an application for the Enhanced STAR exemption. If not, you may be eligible for the Enhanced STAR credit, which is provided in the form of a check. To receive an Enhanced STAR check, you must register for it. For more information, visit www.tax.ny.gov/star or call (518) 457-2036.

<table>
<thead>
<tr>
<th>Name of owner(s)</th>
<th>Source of Income</th>
<th>Amount of Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total income of owner(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name of spouse(s) if not owner of property</td>
<td>Source of income of spouse(s)</td>
<td>Amount of income of spouse(s)</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>-------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>William</td>
<td>INTEREST</td>
<td>3,451</td>
</tr>
<tr>
<td></td>
<td>IRA DISTRIBUTIONS</td>
<td>6,202</td>
</tr>
<tr>
<td></td>
<td>SOCIAL SECURITY</td>
<td>25,211</td>
</tr>
</tbody>
</table>

Total income of spouse(s) .................................................................

Total income of owner(s) and spouse(s) .............................................. a 

b Of the income in line a, how much, if any, was used to pay for an owner's care in a residential health care facility? Attach proof of amount paid; enter 0 if not applicable. (see instructions) ...........................................

b

c Line a minus line b .........................................................................................

c

d If a deduction for unreimbursed medical and prescription drug expenses is authorized by any of the municipalities in which property is located (contact assessor for information), complete the following:

(i) Medical and prescription drug costs; ...................................................... (i)

(ii) Subtract amount of (i) paid or reimbursed by insurance ......................... (ii)

(iii) Unreimbursed amount of (i) (attach proof of expenses and reimbursement, if any; enter 0 if option not available); ................................................ (iii)

Subtotal income of owner(s) and spouse(s) (line c minus line d, item (iii)) .................................................................

e If a deduction for veteran's disability compensation is authorized by any of the municipalities in which the property is located, complete the following:

Veteran's disability compensation received. Attach proof; enter 0 if not applicable ........................................ e

Total income of owner(s) and spouse(s) (line d subtotal minus line e) .................................................................

5 Certification
I (we) certify that all statements made on this application are true and correct to the best of my (our) belief. I (we) understand that any willful false statement of material fact will be grounds for disqualification from further exemption for a period of five years, and a fine of not more than $100.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Marital status</th>
<th>Phone number</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>William</td>
<td>D</td>
<td>518-368-4530</td>
<td>2-15-18</td>
</tr>
</tbody>
</table>

This Area for Assessor's Use Only

Date renewal application filed ____________________________              Approved □      Disapproved □

Exemption applies to taxes levied by or for:

City/Town % □      County % □

School % □      Village % □

Assessor's signature ____________________________ Date ____________________________
February 26, 2019

Hon. Andrew Joyce, Chairman
Albany County Legislature
112 State St., Rm. 710
Albany, NY 12207

Dear Chairman Joyce:

On behalf of SMG and Aramark, and in coordination with the County Executive’s office, we would appreciate it very much if you would add an emergency agenda item on the agenda for the Audit & Finance Committee meeting scheduled to occur on this Wednesday night 2/27. This is regarding a RLA for the Authorization to permit Aramark to reopen the restaurant & bar formerly operated as Johnny Rockets. Aramark has been a reliable company that has operated the concessions and catering at the Times Union Center since the building opened. We have a trust in their personnel and we know that they will be able to operate this space very well; and if we can enable them to get into the space by March 1, 2019 with the issuance of a liquor license by the NY State Liquor Authority, the County will have an opportunity to generate very large commissions/revenues.

Aramark has purchased the furniture, TV’s, bar equipment and other items that were not included within the initial investment made by the County. The County paid just under $200K for kitchen equipment, grills, fryers and other equipment that has been tagged with “Owned by Albany County” and that will remain the property of the County. But in order to ensure the space can reopen as fast as possible, Aramark invested $75K for the furnishings and items described above in order to assist the County and SMG. They are offering to operate the space on event days on an interim basis under the name “Backstage Bar” with the understanding that 25% of food sales and 30% of beverage sales will be paid to the County. This arrangement would continue until such time and if a longer term lease is presented for approval from a brand operator or if someone else presents a concept with guaranteed monthly rent that is acceptable to the County.

Given that we know prior operators before Johnny Rockets were grossing $10K - $20K on sellout concerts and big events “per night”, we believe the County has an opportunity to generate over $30K in commissions just from the events that are scheduled to occur in March – 2019. There are sellout concerts, sports tournaments and family shows coming
to the arena in March. If we can provide authorization to Aramark from the County Attorney’s office with leadership of the legislature in agreement to permit Aramark to begin operation on March 1st, which is the night of Elton John (this Friday), we will be able to generate revenue for the County immediately. A letter would need to be provided by the County Attorney, which Aramark would then provide to the SLA with the understanding that a resolution would be passed by the legislature at its Audit and Finance Committee meeting on 2/27 and then by the full legislature in March.

Please add this item on the meeting for on Wednesday night. I thank you for this consideration.

Sincerely,

Bob Belber
General Manager

cc: Dennis A. Feeney, Majority Leader
    Frank A. Maurillo, Minority Leader
    Kevin Cannizzaro, Majority Counsel
    Arnis Zilgme, Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

DATE: February 22, 2019
DEPARTMENT: Times Union Center

Contact Person: Robert Belber
Telephone: (518) 487-2008
Dept. Representative Attending
   Committee Meeting: Robert Belber, Times Union Center

PURPOSE OF REQUEST:
Adoption of Local Law
Amendment of Prior Legislation
Approval/Adoption of Plan/Procedure
Bond Approval
Budget Amendment (See below)
Contract Authorization (See below) X
Environmental Impact
Home Rule Request
Property Conveyance
Other: (State briefly if not listed above)

CONCERNING BUDGET AMENDMENTS STATE THE FOLLOWING:
   Increase Account/Line No.
   Source of Funds:
   Title Change:

CONCERNING CONTRACT AUTHORIZATION STATE THE FOLLOWING:

TYPE OF CONTRACT
Change Order/Contract Amendment
Purchase (Equipment/Supplies)
Lease (Equipment/Supplies) X
Requirements
Professional Services
Education/Training
Grant:
   New
   Renewal
Submission Deadline Date
Settlement of a Claim
Release of Liability
Other: (State briefly):

CONCERNING CONTRACT AUTHORIZATION (Cont’d)
STATE THE FOLLOWING:

Contract Terms/Conditions:

Party (Name/Address):

Aramark Sports and Entertainment Services, LLC
1101 Market Street
Philadelphia, PA 19107

Amount/Rate Schedule/Fee: 25% of all net sales on food items
and 30% of all net sales on beverage items

Term: Month to month starting March 1, 2019 and continuous until such
time that Albany County accepts an offer from an acceptable operator that
will provide the County with a long-term lease commitment.

Scope of Services: Aramark will operate a full scale restaurant and bar,
which will be named “Backstage Bar” temporarily until another offer for a
long-term lease with a brand named operator is approved by the Albany
County Legislature. Aramark will open the restaurant/bar on days when
there are events taking place inside the Times Union Center. It also may
operate on non-event days at its option.

Contract Funding:

Anticipated in Current budget: Yes _X__ No ___
Funding Source: ____________________________
County Budget Accounts: ____________________________
Revenue: ____________________________
Appropriation: ____________________________
Bond (Res. No. & Date of Adoption) __________

CONCERNING ALL REQUESTS:

Mandated Program/Service: Yes ___ No _X_
If Mandated Cite: Authority ____________________________
Anticipated in Current Adopted Budget: Yes ___ No ___
If yes, indicate Revenue/Appropriation Accounts: ____________________________
Fiscal Impact -Funding: (Dollars or Percentages)
 Federal __________
 State __________
 County __________
 Term/Length of Funding ____________________________

Previous Requests For Identical or Similar Action:
 Resolution/Law Number: __________
 Date of Adoption: __________

Justification: (State briefly why legislative action is requested)
The County purchased almost $200K worth of kitchen equipment when Johnny Rockets
went into this space. The reason for this investment was to make it easier to have a
replacement operator go into the space if Johnny Rockets failed to continue to operate.
With all of the big events coming up in March 2019 and beyond, the County could earn as
much in revenues as it would have based on a flat per month rent. After informing SMG
and Albany County that he could not operate the Johnny Rockets business anymore, the
owner of Johnny Rockets agreed to sell all of the furniture, TV screens, bar equipment
and all other operating equipment inside the space that was not purchased by Albany County. He voluntarily vacated the space to allow for another operator to open up a new business in the space. Aramark stepped up with an investment of over $75K to buy the furniture and bar equipment in an effort to help SMG and Albany County continue to have the space be utilized and opened back up as a restaurant/bar until another tenant/operator with an acceptable offer steps up. Aramark has done a good job on the concourse and throughout the arena handling food and beverage sales at the Times Union Center since it opened in 1990. They have staff on site and excellent chefs that will be able to service this restaurant and bar while operating the food service at the arena.

**Back-up Material Submitted:** (i.e., application/approval notices from funding source, bid tabulation sheet, civil service approval notice, program announcement, contracts and/or any materials which explain or support the request for legislative action.)

Copy of the Asset Purchase Agreement between Louis W. Chiacelli (the owner of Johnny Rockets) and Aramark Sports and Entertainment Services, LLC for the sale of the furniture, TV’s and bar equipment.

Copy of the letter that is signed and notarized by Louis W. Chiacelli that voluntarily surrendered the premises.

Submitted By:  
Title: General Manager @ the Times Union Center
ASSET PURCHASE AGREEMENT

This ASSET PURCHASE AGREEMENT (this "Agreement") is made and entered into as of J ANUARY 4, 2019 by and among JR Albany, LLC, a New York limited liability company ("Seller"), Louis W. Chicatelli, Jr. (the "Owner"), and Aramark Sports and Entertainment Services, LLC, a Delaware limited liability company ("Buyer"). Each of Seller, the Owner and Buyer may be referred to herein as a "Party", and collectively, the "Parties".

RECITALS

Seller operates a Johnny Rockets restaurant at 51 South Pearl Street, Albany, NY 12207 (the "Premises"), in which certain food service equipment, identified on Exhibit A hereto (the "Equipment"), for food service activities related to the operation of the restaurant within the Times Union Center (the "Business").

Seller desires to sell and deliver the Equipment used in the operation of the Business.

STATEMENT OF AGREEMENT

NOW, THEREFORE, in consideration of the covenants, representations, warranties and agreements herein contained, and other good and valuable consideration the receipt and sufficiency of which are hereby acknowledged. Intending to be legally bound, the parties hereto agree as follows:

1. Sale and Purchase. Upon the terms and subject to the satisfaction of the conditions set forth in this Agreement, at the Closing (as hereinafter defined), Seller shall sell, convey, assign, transfer and deliver to Buyer, and Buyer shall purchase and acquire from Seller, all of Seller's right, title and interest in and to the Equipment, free and clear of all mortgages, security interests, pledges, liens, encumbrances of any type, options and rights of others.

2. Purchase Price.

2.1 In consideration for Seller's transfer of the Equipment to Buyer at the Closing, Buyer shall pay to KeyBank (the "Bank") a purchase price of Eighty Thousand Dollars $80,000.00 (the "Purchase Price"). The Purchase Price shall be paid by Buyer on the Closing Date by wire transfer payable in same day funds to such account as has been designated in writing by the Bank, more particularly described in the Payoff Letter in "Exhibit C". The Bank shall then transfer to the Seller an agreed upon portion of the Purchase Price.

3. Non-Assumption of Liabilities. Notwithstanding anything to the contrary herein, Buyer does not hereby and shall not assume any liabilities or obligations of Seller or Owner whether arising or relating to the period prior to the Closing or the period after the Closing. All liabilities and obligations of Seller and/or Owner, including without limitation any liabilities relating to or resulting from the operation of the Business (which, for the avoidance of doubt, includes any liability or obligation arising out of or relating to a breach of any Contract that occurred prior to the Closing), shall be retained by Seller and/or Owner, as applicable, subsequent to the Closing.
4. **Closing.**

4.1 The sale and purchase of the Equipment provided for in this Agreement (the "Closing") shall take place on January 4, 2019.

4.2 **Closing Deliveries.** The following steps will be taken concurrently by Seller and Buyer, respectively, at the Closing: (a) Seller and Buyer shall each execute and deliver to the other a bill of sale and assignment in the form attached hereto as Exhibit B (the "Bill of Sale"); (b) Buyer shall deliver to the Bank the Purchase Price as set forth in Section 2.1. At the Closing, the Parties shall execute and deliver all such instruments and take all such other action as either party may reasonably request from time to time, in order to effect the transaction provided for herein.

5. **Representations and Warranties of Seller and the Owner.** Seller and the Owner hereby jointly and severally represent and warrant to Buyer as follows:

5.1 **Existence.** Seller is a limited liability company duly incorporated, validly existing and in good standing under the laws of its jurisdiction of New York with full power and authority to conduct its business and to perform all its obligations under this Agreement.

5.2 **Authorization.** Each of Seller and the Owner has all necessary power, capacity and authority to enter into this Agreement and the other agreements contemplated herein and to carry out its respective obligations hereunder and thereunder. The execution and delivery of this Agreement and the consummation of the transactions contemplated hereunder have been duly authorized by all necessary action on the part of Seller.

5.3 **No Conflicts.** Neither Seller nor the Owner is a party to, bound or affected by or subject to any indenture, note, mortgage, deed of trust, lease, Contract, instrument, license, charter or bylaw provisions, statute, regulation, order, arbitration award, judgment, decree or law which would be violated, contravened, breached by, conflict with, or under which default would occur as a result of the execution and delivery of this Agreement or the consummation of any of the transactions provided for herein. The execution and delivery of this Agreement and the consummation of the transactions provided for herein will not result in the creation or imposition of any lien, encumbrance, charge or claim whatsoever on the Equipment.

5.4 **Right to Sell.** Seller is the absolute beneficial owner of the Equipment with good and marketable title thereto, free and clear of any mortgage, security interest, pledge, lien, charge, encumbrance of any type, option or right of others. Seller is exclusively entitled to possess and dispose of the Equipment and to otherwise perform its obligations hereunder without the approval or consent of any Person.

5.5 **Enforceability of Obligations.** This Agreement constitutes a valid and binding obligation of each of Seller and the Owner enforceable against each of them in accordance with the terms hereof.

5.6. **Compliance with Law.** Seller's operation of the Business is and has been in compliance with all applicable laws and regulations, whether federal, state or local. Seller does not know of any proceeding or investigation of any governmental authority, whether federal, state or local, that is pending or threatened relating to the Equipment or the operation of the Business.
5.7 **Environmental Matters.** No event or condition has occurred or is occurring with respect to the Business that is in violation of any law or regulation, whether federal, state or local, that is related to environmental matters or the protection of humans, plant or animal health or welfare. While operating the Business, Seller has not caused, whether solely or in conjunction with any other Person, a release of any hazardous material into the environment.

5.8 **Insurance.** Seller maintains adequate and commercially reasonable insurance coverage on the Equipment and the Business, which insurance covers liabilities and risks prudently insured against by similar businesses. The policies or binders of insurance covering the Business or its Equipment (the "Policies") are in full force and effect and Seller is in compliance with the terms and conditions of the Policies.

5.9 **Condition of Equipment.** The Equipment is in good operating condition, working order and repair, subject to ordinary wear and tear, free from material defects, is usable in the ordinary course of the business and is suitable for the purposes for which it is currently being used.

5.10 **Intentionally Omitted.**

5.11 **Contracts.** Seller is in compliance in all material respects with the provisions of each Contract to which it is a party, and to its knowledge, no other party is in default in the performance, observance or fulfillment of any obligation, covenant or condition contained therein and no event has occurred which with or without the giving of notice or lapse of time, or both, would constitute a default thereunder.

5.12 **Litigation.** There are no unsatisfied judgments or any litigation or proceeding or governmental investigation, existing, threatened or pending, against or relating to Seller, its properties or the Business or the Equipment, and neither Seller nor the Owner knows nor has reasonable grounds to know of any basis of any such action or governmental investigation relative to Seller, its properties or the Business or the Equipment.

5.13 **Intentionally Omitted.**

5.14 **Solvency.** Seller is in the process of winding down its business and this sale is an appropriate measure to that end. Seller will not be rendered insolvent solely by any of the transactions contemplated by this Agreement. This sale shall not be deemed a reason of Insolvency and in no event, shall any insolvency adversely affect the buyer as it relates to this sale.

5.15 **No Brokers.** No Person is entitled to any brokerage or finder's fee or other commission in respect of this Agreement or the consummation of the transactions contemplated hereby. Any fee required to be paid to any broker or finder acting on behalf of Seller or the Owner entitled to compensation as a result of the transactions contemplated herein shall be paid by Seller or the Owner.

6. **Additional Agreements.**

6.1 **Operation of the Business.** Between the date of this Agreement and the Closing Date, Seller will diligently conduct all aspects of the Business and refrain from operating its business other than in the ordinary course consistent with past practice. Without limiting the
generality of the immediately preceding sentence, between the date of this Agreement and the Closing Date, Seller will:

(a) comply with all applicable laws and regulations, whether federal, state or local;

(b) maintain in full force and effect its insurance coverage; and

(c) not cause any liens, encumbrances or other restrictions on the Equipment to be created.

6.1.1. Closing of the Business. The Seller shall, on the Closing Date, (i) release and/or agree upon termination of its lease of the Premises, (ii) leave the Premises in broom-clean condition, and (iii) Relinquish its liquor license, by execution of Petition For Surrender of License as seen in “Exhibit D”, attached hereto, at no cost to the Buyer.

6.2 Litigation and Adverse Developments. Seller will promptly advise Buyer in writing of the threat or commencement of any dispute, claim or litigation, against or involving the Equipment, including thePermits, the Business, or this Agreement or the transactions contemplated hereby.

6.3 Tax Matters.

(a) Seller shall be responsible for and shall pay in a timely manner (i) all taxes of Seller incurred during or attributable to the period prior to Closing, (ii) any taxes imposed with respect to the Business or any Equipment or any income or gain derived with respect thereto for the taxable periods, or portions thereof, ended on or before the Closing, and (iii) all taxes, including, without limitation, any sales, use, transfer, value added or stamp taxes, imposed on Seller resulting from or payable in connection with the sale of the Equipment pursuant to this Agreement.

(b) Each Party shall cooperate fully, as and to the extent reasonably requested by the other Party, in connection with the filing of tax returns and the conduct of any tax proceedings related to the Equipment or the Business.

6.4 Payment of Liabilities. On and after the Closing Date, Seller shall pay in full all liabilities and obligations (i) relating to the Equipment or the operation of the Business, which arose prior to the Closing Date or (ii) under this Agreement.

6.5 Further Assurances. The Parties shall cooperate with each other in connection with any steps required to be taken as part of their respective obligations under this Agreement and shall (a) furnish upon request to each other such further information; (b) execute and deliver to each other such other documents; and (c) take all such other action, all as the other Party may reasonably request for the purpose of carrying out the intent of this Agreement and the transactions contemplated hereby.
7. **Conditions Precedent to Buyer's Obligations.** The obligations of Buyer under this Agreement to purchase the Equipment at the Closing are subject to the fulfillment, satisfaction or waiver by Buyer prior to or at the Closing, of each of the following conditions precedent:

7.1 **Representations and Warranties True as of the Closing Date.** The representations and warranties of Seller and the Owner contained in this Agreement shall be true at and as of the Closing Date with the same effect as though such representations and warranties were made as of the Closing Date.

7.2 **Compliance with this Agreement.** Seller and the Owner shall have performed and complied with all agreements and conditions required by this Agreement to be performed or complied with by them prior to or at the Closing.

7.3 **Intentionally Omitted.**

7.4 **No Litigation.** No action, arbitration, hearing, litigation or suit shall be threatened or pending before any court, governmental authority or other arbitral body in which it is (a) sought to restrain or prohibit the sale of the Equipment or transfer or assignment of the Permits pursuant to this Agreement or (b) to obtain damages or other relief in connection with this Agreement. No order, writ, judgment or decision shall exist that (i) restrains or prohibits the sale of the Equipment or transfer or assignment of the Permits pursuant to this Agreement or (ii) awards damages or other relief in connection with this Agreement.

7.5 **Due Diligence.** Buyer shall have completed its due diligence investigation of the Equipment and the Business to the reasonable satisfaction of Buyer.

8. **Indemnification.**

8.1 **Indemnification by Seller and the Owner.** From and after the Closing, Seller and the Owner, jointly and severally, shall reimburse, indemnify and hold harmless Buyer and any of its affiliates and any of their respective directors, officers and employees, against and in respect of any damages, losses, liabilities, obligations, costs, expenses, diminutions in value, claims of any kind, interest or penalties (including attorneys' fees and expenses) (collectively, "Damages") arising from or relating in any way to (a) the operation of the Business prior to the Closing; and (b) the breach of any representation, warranty, covenant or agreement by Seller or the Owner contained in this Agreement.

8.2 **Indemnification by Buyer.** From and after the Closing, Buyer shall reimburse, indemnify and hold harmless Seller and any of its respective directors, officers and employees, against and in respect of any Damages arising from or relating in any way to the breach of any representation, warranty, covenant or agreement by Buyer contained in this Agreement.

8.3 **Notice.** Each party agrees to promptly notify the other of all Damages for which such party will seek indemnity hereunder; provided, however, that the failure to give timely, complete or accurate notice of a claim for indemnification will not affect the rights or obligations of any party hereunder except and only to the extent that such failure results in actual prejudice to the other parties.
8.4 **Effect of Investigation.** Buyer’s right of indemnification under this Agreement shall not be limited by reason of any investigation or audit conducted before or after the Closing Date, the knowledge of Buyer or any affiliate of Buyer of any breach of a representation, warranty, covenant or agreement by Seller or the Owner or the decision of Buyer to complete the Closing.

8.5 **Survival of Representations.** All representations and warranties made by Buyer, Seller or the Owner in this Agreement shall survive the Closing. However, there is no implied or express warranty on the condition of the Equipment, now or post-closing. Seller reaffirms that the Equipment is in good working order.

8.6 **Rights Not Exclusive.** The rights of indemnification provided hereunder shall be independent of and in addition to any other rights and remedies of the parties at law or in equity (including specific performance).

9. **Termination.** This Agreement may be terminated at any time prior to the Closing:

(a) by the mutual written consent of Seller and Buyer;

(b) by Buyer if any of the conditions set forth in Section 7 become incapable of being satisfied; or

(c) by Buyer if the Closing shall not have occurred on or prior to January 11, 2019.

If this Agreement is terminated as permitted by Sections 9(a), such termination shall be without liability of any party to any other party to this Agreement. In the event of such termination, each Party shall destroy or return all documents and other materials received from the other Party relating to this Agreement and the contemplated transaction, and all confidential information received by each Party with respect to any other Party shall be treated in accordance with the terms of the confidentiality agreement entered into by and between the Parties.

10. **Miscellaneous.**

10.1 **Expenses.** Each Party shall pay its own expenses incidental to the preparation of this Agreement, the carrying out of the provisions of this Agreement and the consummation of the transactions contemplated hereby.

10.2 **Exclusive Dealing.** During the period from the date of this Agreement to the earlier of the Closing and the date this Agreement is terminated in accordance with Section 9, neither Seller nor the Owner shall, (a) take any action to encourage or solicit the sale of the Equipment or Business or (b) engage in discussions or negotiations with any Person other than Buyer and its agents concerning any sale of the Equipment or Business. If Seller or the Owner receive any offer to purchase the Equipment or the Business, or any similar transaction involving the Equipment or the Business, Seller shall immediately notify Buyer.

10.3 **Contents of Agreement, etc.** All exhibits and schedules referred to herein are intended to be and hereby are specifically made a part of this Agreement. This Agreement sets forth the entire understanding of the Parties with respect to the transactions contemplated hereby.
This Agreement shall not be amended or modified except by written instrument duly executed by each of the Parties. Any and all previous agreements and understandings between or among the parties regarding the subject matter hereof, whether written or oral, are superseded by this Agreement. Any ambiguities in this Agreement will not be strictly construed against the drafter of the language but shall be resolved by applying the most reasonable interpretation under the circumstances, giving full consideration to the intentions of the Parties at the time of contracting.

10.4 **Assignment and Binding Effect.** This Agreement may not be assigned prior to the Closing by any Party without the prior written consent of the other Parties, except that Buyer may assign any right hereunder to an affiliated entity without the consent of the other Parties. Subject to the foregoing, all of the terms and provisions of this Agreement shall be binding upon and inure to the benefit of and be enforceable by the heirs, executors, administrators, legal representatives, successors and assigns of the Owner and by the successors and assigns of Seller and Buyer.

10.5 **Waiver.** Any term or provision of this Agreement may be waived at any time by the Party entitled to the benefit thereof by a written instrument duly executed by such Party.

10.6 **Notices.** Any notice, request, demand, waiver, consent, approval or other communication which is required or permitted hereunder shall be in writing and shall be deemed given only if delivered personally or sent by overnight courier of nationally recognized standing, shipping prepaid, for delivery on the Business Day immediately following the day delivered to, or picked up by, such overnight courier, addressed as follows:

If to Buyer, to:

Aramark Sports and Entertainment Services, LLC  
1101 Market Street  
Philadelphia, PA 19107  
Attention: President, Aramark Sports and Entertainment Services, LLC

With a required copy to:

Aramark Sports and Entertainment Services, LLC  
1101 Market Street  
Philadelphia, PA 19107  
Attention: Associate General Counsel, Aramark Sports and Entertainment Services, LLC

If to Seller or the Owner, to:

Louis W. Chicatelli, Jr., Esq.  
Rosenstein Orapello, PLLC  
440 New Karner Road  
Albany, NY 12205

or to such other address as the addressee may have specified in a notice duly given to the sender as provided herein. Such notice, request, demand, waiver, consent, approval or other
communication will be deemed to have been given as of the date so personally delivered or on the Business Day immediately following the date delivered.

10.7 **Announcements; Disclosure.** Neither Seller nor the Owner shall make any public announcement of the execution of this Agreement or the Closing of the transactions contemplated hereby. Seller and the Owner shall keep confidential and not disclose the terms of this Agreement, except as may be required by law or regulation and then only after Buyer shall have been afforded, to the extent practicable, a reasonable opportunity to review and comment on the same.

10.8 **Governing Law.** This Agreement shall be governed by and interpreted and enforced in accordance with the laws of the State of New York without regard to its conflict of laws provisions.

10.9 **No Benefit to Others.** The representations, warranties, covenants and agreements contained in this Agreement are for the sole benefit of the Parties and, in the case of Sections 8.1 and 8.2, the other indemnified Persons, and their heirs, executors, administrators, legal representatives, successors and assigns, and they shall not be construed as conferring any rights on any other Persons.

10.10 **Headings; Gender.** All section headings contained in this Agreement are for convenience of reference only, do not form a part of this Agreement and shall not affect in any way the meaning or interpretation of this Agreement. Words used herein, regardless of the number and gender specifically used, shall be deemed and construed to include any other number, singular or plural, and any other gender, masculine, feminine, or neuter, as the context requires.

10.11 **Severability.** Any provision of this Agreement which is invalid or unenforceable in any jurisdiction shall be ineffective to the extent of such invalidity or unenforceability without invalidating or rendering unenforceable the remaining provisions hereof, and any such invalidity or unenforceability in any jurisdiction shall not invalidate or render unenforceable such provision in any other jurisdiction.

10.12 **Counterparts.** This Agreement may be executed in any number of counterparts via facsimile or otherwise and any party hereto may execute any such counterpart, each of which when executed and delivered shall be deemed to be an original and all of which counterparts taken together shall constitute but one and the same instrument. This Agreement shall become binding when one or more counterparts taken together shall have been executed and delivered by the Parties.

11. **Definitions.** The following words and phrases when used in this Agreement shall have, unless the context clearly indicates otherwise, the meanings given to them in this Section.

- **"Equipment"** shall have the meaning specified in the Recitals.
- **"Agreement"** shall have the meaning specified in the Preamble.
- **"Bill of Sale"** shall have the meaning specified in Section 4.2.
- **"Business"** shall have the meaning specified in the Recitals.
"Business Day" shall mean any day that is not a Saturday or Sunday or other day on which banks are required or authorized by law to be closed in the City of Philadelphia, Pennsylvania and the State of New York.

"Buyer" shall have the meaning specified in the Preamble.

"Closing" shall have the meaning specified in Section 4.1.

"Closing Date" shall mean the date on which the Closing shall take place.

"Contract" means any contract, commitment or other agreement or arrangement to which Seller or the Owner is a party and relates to the Equipment or Business.

"Damages" shall have the meaning specified in Section 8.1.

"Owner" shall have the meaning specified in the Preamble.

"Party" or "Parties" shall have the meaning specified in the Preamble.

"Person" means any individual, firm, corporation, partnership, limited liability company, trust, regulatory or governmental agency or authority or any other entity.

"Policies" shall have the meaning specified in Section 5.8.

"Premises" shall have the meaning specified in the Recitals.

"Purchase Price" shall have the meaning specified in Section 2.1.

"Seller" shall have the meaning specified in the Preamble.
IN WITNESS WHEREOF, the Parties have duly executed this Agreement as of the date first written above.

Seller:

JR Albany, LLC

By: 
Name: 
Title: 

Owner:

Louis W. Chicatelli, Jr.

Buyer:

ARAMARK SPORTS AND ENTERTAINMENT SERVICES, LLC

By: 
Name: Mark Adams
Title: Vice President, Finance

[Signature Page to Asset Purchase Agreement]
EXHIBIT A

List of Equipment

- 36 high-top/dining Tables
- 180 Chairs/Barstools
- Camera system and monitors
- 3 zone sound system
- Televisions and accompanying controller system
- All existing small wares
- All existing office furniture
- 2 upright freezers
- Stainless steel prep tables
- Shelving
- Any additional operating items except for those identified as belonging to the County.
EXHIBIT B

BILL OF SALE

On this 41 day of January, 2019, JR Albany, LLC, a New York limited liability company ("Seller"), in consideration of the aggregate sum of $80,000.00 (the "Purchase Price") and other valuable consideration received from Aramark Sports and Entertainment Services, LLC, a Delaware limited liability company ("Buyer"), pursuant to that certain Asset Purchase Agreement, dated the date hereof, by and among Seller, JR Albany and Buyer (the "Agreement"), receipt of which is hereby acknowledged, Seller hereby grants, bargains, sells and delivers to Buyer, its successors and assigns, all Seller’s right, title and interest in and to the Equipment owned by Seller and described on Exhibit A to the Agreement, and such exhibit is made a part hereof, to have and to hold the Equipment unto the Buyer, its successors and assigns, forever. Such Equipment is located in Albany, New York. Capitalized terms used but not defined herein shall have the meaning ascribed thereto in the Agreement.

Seller hereby sells, conveys, transfers, assigns and delivers to Buyer, its successors and assigns all of Seller’s right, title and interest in and to all of the Equipment, free and clear of all mortgages, security interests, pledges, liens, charges, encumbrances of any type, options and rights of others. Nothing expressed or implied in this Bill of Sale shall be deemed to be an assumption by Buyer of any liabilities or obligations of Seller.

Each of Seller and Buyer, by its execution and acceptance of this Bill of Sale, hereby acknowledges and agrees that the representations, warranties and covenants under the Agreement shall not be deemed to be merged, enlarged, diminished, modified or altered in any way by this instrument, and in the event of any conflict, the terms of the Agreement shall prevail. This Bill of Sale shall bind and inure to the benefit of Seller and Buyer and their respective successors and permitted assigns. This Bill of Sale shall be governed by and interpreted and enforced in accordance with the laws of the State of New York without regard to its conflict of laws provisions. This Bill of Sale may be executed in any number of counterparts via facsimile or otherwise and any party hereto may execute any such counterpart, each of which when executed and delivered shall be deemed to be an original and all of which counterparts taken together shall constitute but one and the same instrument. This Bill of Sale shall become binding when one or more counterparts taken together shall have been executed and delivered by the parties hereto. The terms and provisions of this Bill of Sale are intended solely for the benefit of the parties hereto and their respective successors and permitted assigns, and it is not the intention of the parties to confer third party beneficiary rights, and this Bill of Sale does not confer any such rights, upon any other Person. This Bill of Sale may not be changed, amended, modified, discharged or terminated in any manner other than by an agreement in writing signed by the parties hereto.

[Signature Page Follows]
IN WITNESS WHEREOF, Seller has executed and delivered this Bill of Sale as of the date first above written.

_Seller:_

JR Albany, LLC

By:  
Name:  
Title:  

_Buyer:_

ARAMARK SPORTS AND ENTERTAINMENT SERVICES, LLC

By:  
Name:  
Title:  

Vice President, Finance
"Exhibit C"
Payoff Letter

[Please see attached]
December 20, 2018

Aramark, Inc.
51 South Pearl Street
Albany, New York 12207

Re: Loan # 9014184876-9140325007 to JR Albany, LLC (the “Loan”)

Dear Michael Donnini:

Per your request, listed below is a payoff breakdown to release the UCC’s on all equipment associated with the above Loan.

**EQUIPMENT BALANCE:** $80,000.00

Payoff must meet the following specifications:

- Funds MUST be in the form of a cashier’s check, certified check, or wire transfer. Any other form will delay the release of any liens securing the Loan and may result in additional interest charges until the payoff amount becomes collected funds without risk of chargeback.

- Funds MUST be received by 3:00 p.m. regardless of payment method. If funds are received after 3:00 p.m., the payoff will be treated as the next day’s business and the appropriate charges will be applied.
Please use the following information to remit the payoff by U.S. Mail, Courier or wire transfer:

**Mailing Address:**
KeyBank National Association  
Attn.: Brian Sadowski  
66 South Pearl Street  
Albany, New York 12207

**Wire Transfer Information:**
KeyBank National Association  
ABA #021300077  
Account: #810171941  
BNF: Risk Management  
OBI: JR Albany

Provided the Loan is paid in full, KeyBank National Association agrees to release all security instruments securing the Loan unless such security instruments secure other unpaid debt with KeyBank National Association or its affiliates.

If you require further assistance, please contact me.

Very truly yours,

Brian Sadowski
Exhibit D
Petition for Surrender of License

[Please see attached]
STATE OF NEW YORK – LIQUOR AUTHORITY
ATTN: Refund Unit
80 South Swan Street, Suite 960
Albany, NY 12210-8022

If the license holder is to surrender a license or permit voluntarily for cancellation and refund, if any, before the expiration date, as provided in Section 127 of the Alcoholic Beverage Control Law, fill in and sign the following petition and send to the State Liquor Authority address listed above, together with the license or permit certificate. Any false statements may subject the license or permit to disciplinary proceedings and void any request for refund.

NOTE: No refund is payable unless this form is completed and the Federal Employer Identification Number (FEIN) of the licensed entity has been provided.

PETITION FOR SUBRENDEL OF LICENSE

TO THE STATE LIQUOR AUTHORITY:
The undersigned, [individual] [partnership] [corporation] (CHECK ONE) petitions the Liquor Authority, under provisions of Section 127 of the Alcoholic Beverage Control Law, to accept voluntary surrender of license (permit) certificate number [870927] which was issued to [SR Albasco, LLC] and is in support of this petition makes the following statements and answers:

1. Has the license or (if a partnership) any of the partners or (if a corporation) any of the officers, directors or stockholders been arrested or indicted or served with a summons for any crime or offense (except traffic violations or violations of the Administrative Code) in the past 12 months? YES or NO

2. Has any person other than the person or persons named above in Question 1 been arrested or indicted or served with a summons for any crime or offense committed on the licensed premises or which involved the licensed business (except violations of the Administrative Code) in the past 12 months? YES or NO

3. The undersigned petitioner further states that the said license will, upon the surrender of said license, cease to be in effect on [license expiration date].

WHEREFORE, the undersigned petitioner asks that said license be cancelled and a refund made as provided in Section 127 of the Alcoholic Beverage Control Law.

Individual and/or Partnerships complete both Sections (A)

(A) Individual licensee and each member of a partnership sign here and sign appropriate certification below.

Dated ____________________________

(Signature of person(s) signing petition)

Present residence address of:

________________________________________

________________________________________

Corporation completes both Sections (B)

(B) If a Corporation, sign here and sign appropriate certification below.

Dated ____________________________

Name of Corporation: [SR Albasco, LLC]

By [name of individual member], Jr.

CERTIFICATION TO BE SIGNED AND DATED BY INDIVIDUAL, AND EACH MEMBER OF PARTNERSHIP

The undersigned, for himself/herself certifies that herein is the holder of the above-listed license; that herein is the holder of the above-listed license; and the statements contained herein, and the same are true of his/her own knowledge.

Dated ____________________________

(Signature of person(s) signing petition)

Present residence address:

________________________________________

________________________________________

CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION

[Last name] [First name], Jr., of the [name of corporation], certifies that herein is the President/Member of the Corporation which is holder of this license and which made and executed this petition; that herein is the President/Member of the Corporation which is holder of this license and which made this petition; and the statements contained herein, and the same are true of his/her own knowledge.

Dated ____________________________

(Signature of person signing petition)

Present residence address:

________________________________________

________________________________________

Date of Surrender: ____________________________

License Serial No. ____________________________

Please specify the address where the refund, if any, is to be mailed:

SLA Form 225-008 (01/24/2011)
I, Louis W. Chicatelli, Jr., agree to voluntarily surrender and remove myself from the premises located at 51 South Pearl Street (3,106 square feet of commercial space located in the front entry plaza) Albany, New York 12207. I am the CEO of JR Albany, LLC and thereby have the authority to bind the company with this decision to vacate. I understand that by leaving said premises that it will not relieve me of any responsibility of non-payment that I may have to Albany County.

Dated: February 6, 2019

Louis W. Chicatelli, Jr.

STATE OF NEW YORK  
COUNTY OF ALBANY  
SS:

On the 18th day of February, 2019, before me, the undersigned, personally appeared LOUIS W. CHICATELLI, JR. Personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

[Signature]

NOTARY PUBLIC

KELSEY M. EVANS
NOTARY PUBLIC-STATE OF NEW YORK
No. 01EV9338691
Qualified In Albany County
My Commission Expires 03-14-2020
December 14, 2018

The Honorable Andrew Joyce
Chairman, Albany County Legislature
Legislative Clerk’s Office
112 State Street, Suite 710
Albany, New York 12207

Dear Chairman Joyce:

The Albany County Department of Residential Health Care Facilities respectfully requests to change the name of the Albany County Nursing Home to Shaker Place Rehabilitation and Nursing Center.

It is our intention, through the rejuvenation project of renovation and new construction, to change our past image. By changing our name, we will be able to start a culture change with our internal and external community. This name change will need to be approved by the New York State Department of Health, once we receive this approval, we will work with our media company to inform the public.

We thank you in advance for allowing us to pursue this change of name.

Sincerely,

Larry I. Slatky
Executive Director

cc: Dennis Feeney, Majority Leader
    Frank Mauriello, Minority Leader
    Kevin Cannizzaro, Majority Counsel
    Arnis Zilgme, Minority Counsel
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant
Choose an item. Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed) Click or tap to enter text.

Contract Terms/Conditions:

Party (Name/address):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee:
Click or tap here to enter text.
Scope of Services:
Click or tap here to enter text.

Bond Res. No.:
Click or tap here to enter text.
Date of Adoption:
Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:
Yes ☐ No ☒
If Mandated Cite Authority:
Click or tap here to enter text.

Is there a Fiscal Impact:
Yes ☐ No ☒
Anticipated in Current Budget:
Yes ☐ No ☐
County Budget Accounts:
Revenue Account and Line:  
Revenue Amount:  
Appropriation Account and Line:  
Appropriation Amount:  
Source of Funding - (Percentages)  
Federal:  
State:  
County:  
Local:  
Term  
Term: (Start and end date)  
Length of Contract:  
Impact on Pending Litigation  
Yes ☐ No ☒  
If yes, explain:  
Previous requests for Identical or Similar Action:  
Resolution/Law Number:  
Date of Adoption:  

Justification: (state briefly why legislative action is requested)
Albany County Nursing Home is going through a renovation and new construction project. As part of this rejuvenation we have retained the services of a media company to assist us in changing our image in the community, which includes changing our name to Shaker Place Rehabilitation and Nursing Center.
Hon. Andrew Joyce, Chairman  
Albany County Legislature  
112 State Street, Room 710  
Albany, NY 12207  
February 11, 2019  

Dear Chairman Joyce:  

I am submitting the enclosed Request for Legislative Action for approval on behalf of the Albany County Crime Victim and Sexual Violence Center to sign a Memorandum of Understanding (MOU) with The College of Saint Rose. Saint Rose is applying for a three year grant from the U.S. Department of Justice Office on Violence Against Women to implement, expand, and establish cooperative efforts and projects between sexual assault, domestic violence, and dating violence victim service providers and legal assistance providers to design and implement a multi-disciplinary, coordinated community response to violence against women.  
https://www.justice.gov/ovw/page/file/1113026/download  
This project would provide support and services for the crime victims of Albany County.  

Back up material is provided for your review. Please do not hesitate to contact me if you have any questions or require additional information. Thank you for your consideration.  

Respectfully Submitted,  
Karen Ziegler  
Director  

Cc: Dennis A. Feeney, Majority Leader  
Frank A. Mauriello, Minority Leader  
Kevin Cannizzaro, Esq., Majority Counsel  
Arnis Zilgme, Esq. Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Contract Authorization

Date: 2/1/2019
Submitted By: Karen Ziegler
Department: Crime Victim and Sexual Violence Center
Title: Director
Phone: 518-447-7100
Department Rep.: Karen Ziegler
Attending Meeting: Karen Ziegler

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☒ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☐ Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
☐ Personnel Non-Individual
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☒ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):
The College of Saint Rose
432 Western Avenue
Albany, NY 12203

Additional Parties (Names(addresses)):
Click or tap here to enter text.

Amount/Raise Schedule/Fee:
Scope of Services:
0.00
This Memorandum of Understanding will partner CVSVC with the College of Saint Rose to implement, expand, and establish cooperative efforts and projects between sexual assault, domestic violence, and dating violence victim service providers and legal assistance providers to provide legal assistance for victims of sexual assault, domestic violence, dating violence, and stalking.

Bond Res. No.:
Date of Adoption: Click or tap here to enter text.
Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes ☒ No
Is there a Fiscal Impact: Yes ☐ No ☒
Justification: (state briefly why legislative action is requested)
This RLA is to request that the Albany County Crime Victim and Sexual Violence Center to sign a Memorandum of Understanding (MOU) with The College of Saint Rose. Saint Rose is applying for a three year grant from the U.S. Department of Justice Office on Violence Against Women to implement, expand, and establish cooperative efforts and projects between sexual assault, domestic violence, and dating violence victim service providers and legal assistance providers to provide legal assistance for victims of sexual assault, domestic violence, dating violence, and stalking. <https://www.justice.gov/ovw/page/file/1113026/download> This project would provide support and services for the crime victims of Albany County.
Karen Ziegler, LCSW-R, CASAC 2  
Director, Crime Victim and Sexual Violence Center  
112 State Street, Room 1010  
Albany, NY 12207

Dear Karen,

The College of Saint Rose is applying for and committed to obtaining a Federal Grant as a consortium from the Department of Justice, Office of Violence against Women for FY 2018 which if awarded would run from October 2018 through October 2021. The Crime Victim and Sexual Violence Center was a partner in this grant from 2007 through 2010 and we hope you will remain a partner in this effort. The following is a summary of the grant as requested.

Violence against women is rampant on college campuses across the nation. Albany County, New York, with ten colleges and a university in a circumscribed area, is no exception. The Campus Response to Violence Against Women Project will establish a culture on campus where violence against women is not tolerated, victims are supported and empowered, and offenders are sanctioned.

Toward this end, we will institute a Coordinating Council (CC) composed of representatives from each of our college partners, nonprofit and governmental victim services, and criminal justice agency partners. The role of the CC is to design and implement a multi-disciplinary, coordinated community response to violence against women.

With the addition of at least one new college, and possibly two, the project will focus on four primary responsibilities.

**Goal 1:** Create a coordinated community response to violence against women on campus. A coordinated community response consists of both: (a) partnerships with specific community based organizations that are not inherently affiliated with the college or university, and (b) partnerships with departments, offices, and entities within the college or university. The coordinated community response is responsible for ensuring that the campus develops and implements effective policies and practices to prevent and respond to violence against women issues on campus. A victim service organization should provide services to victims of sexual assault, domestic violence, dating violence, or stalking as one of its primary purposes and have a demonstrated history of effective work concerning such issues. The Crime Victim and Sexual Violence Center’s role in this grant would be an intricate part of this coordination of services.

**Goal 2:** Campus Program grantees must establish a mandatory prevention and education program about sexual assault, domestic violence, dating violence, and stalking for all incoming students, working in collaboration with campus and community-based victim advocacy organizations. The mandatory prevention and
education program should include information about domestic violence, dating violence, sexual assault, and stalking.

Goal 3: Campus Program grantees must train campus police to respond effectively in sexual assault, domestic violence, dating violence, and stalking cases. All mandatory campus law enforcement training programs should be developed in collaboration with campus or community-based victim advocacy programs and should include information about relevant state and Federal laws and arrest protocols; information on enforcement of orders of protection; and instruction on making primary aggressor determinations.

Goal 4: Campus Program grantees must establish or strengthen programs to train members of campus disciplinary boards to respond effectively to charges of sexual assault, domestic violence, dating violence, and stalking. All members of campus disciplinary boards, including faculty, staff, students, and administrators should receive expert training on these crimes. Training topics should include information about the causes and effects of domestic violence, dating violence, sexual assault and stalking; a review of the student conduct code; definitions of domestic violence, dating violence, sexual assault, and stalking; information on the issue of consent in sexual assault cases; how to judge credibility; drug facilitated sexual assault; and the available range of sanctions should the charged student be found responsible by the disciplinary board.

There are also provisions in this grant cycle for equipment and resources that could be shared by the partners in this consortium as long as they fall within the guidelines of the grant.

The Albany County Crime Victims and Sexual Violence Center (CVSVC) is a county-funded crime victim organization that works in conjunction with Equinox, The Legal Project, the District Attorney’s Office, local police, hospitals and campuses to respond to crime victim’s legal advocacy needs and are the local rape crisis center. They provide community education, outreach and direct services with Master’s level counselors. CVSVC staff will provide their services to victims on campus, such as counseling, legal advocacy, hospital and court accompaniment and participate in on-campus education programs and training for volunteers on campus. They will also be a member of the Coordinating Council and share in funding that is provided.

As was the mandate of the previous grant, your signature on a Memorandum of Understanding will be required along with all the other partners of the consortium. As your office is an integral part of the grant, we hope you choose to remain on as a partner so we can continue to draw on your expertise in this field.
Hon. Andrew Joyce, Chairman  
Albany County Legislature  
112 State Street, Room 710  
Albany, NY 12207

February 11, 2019

Dear Chairman Joyce:

I am submitting the enclosed Request for Legislative Action for approval on behalf of the Albany County Crime Victim and Sexual Violence Center to sign a Memorandum of Understanding (MOU) with The Legal Project. The Legal Project is applying for a three year grant from the U.S. Department of Justice Office on Violence Against Women to implement, expand, and establish cooperative efforts and projects between sexual assault, domestic violence, and dating violence victim service providers and legal assistance providers to provide legal assistance for victims of sexual assault, domestic violence, dating violence, and stalking.  
https://www.justice.gov/ovw/page/file/1113026/download

This project would provide support and services for the crime victims of Albany County.

Back up material is provided for your review. Please do not hesitate to contact me if you have any questions or require additional information. Thank you for your consideration.

Respectfully Submitted,

Karen Ziegler  
Director

Cc: Dennis A. Feeney, Majority Leader  
Frank A. Mavridello, Minority Leader  
Kevin Cannizzaro, Esq., Majority Counsel  
Arnif Zilgme, Esq. Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Contract Authorization

Date: 2/1/2019
Submitted By: Karen Ziegler
Department: Crime Victim and Sexual Violence Center
Title: Director
Phone: 518-447-7100
Department Rep.: Karen Ziegler
Attending Meeting:

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☒ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☐ Other: (state if not listed)

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
☐ Personnel Non-Individual
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☒ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):
The Legal Project
24 Aviation Road, Suite 101
Albany, NY 12205

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: $0.00
Scope of Services:
This Memorandum of Understanding will partner CVSVC with the Legal Project to implement, expand, and establish cooperative efforts and projects between sexual assault, domestic violence, and dating violence victim service providers and legal assistance providers to provide legal assistance for victims of sexual assault, domestic violence, dating violence, and stalking.

Bond Res. No.: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes ☐ No ☒
If Mandated Cite Authority:
Click or tap here to enter text.
Is there a Fiscal Impact: **Yes □ No ☒**
Anticipated in Current Budget: **Yes ☒ No □**

**County Budget Accounts:**
Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

**Source of Funding - (Percentages)**
Federal: Click or tap here to enter text.
State: Click or tap here to enter text.
County: Click or tap here to enter text.
Local: Click or tap here to enter text.

**Term**
Term: (Start and end date) October 1, 2019-September 30, 2022
Length of Contract: Three Years

**Impact on Pending Litigation**
If yes, explain: **Yes □ No ☒**
Click or tap here to enter text.

**Previous requests for Identical or Similar Action:**
Resolution/Law Number: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

**Justification:** (state briefly why legislative action is requested)
This RLA is to request that the Albany County Crime Victim and Sexual Violence Center to sign a Memorandum of Understanding (MOU) with The Legal Project. The Legal Project is applying for a three year grant from the U.S. Department of Justice Office on Violence Against Women to implement, expand, and establish cooperative efforts and projects between sexual assault, domestic violence, and dating violence victim service providers and legal assistance providers to provide legal assistance for victims of sexual assault, domestic violence, dating violence, and stalking. [https://www.justice.gov/oww/page/file/1113026/download](https://www.justice.gov/oww/page/file/1113026/download) This project would provide support and services for the crime victims of Albany County.
Hon. Andrew Joyce, Chairman  
Albany County Legislature  
112 State Street, Room 710  
Albany, NY 12207

February 11, 2019

Dear Chairman Joyce:

I am requesting permission to apply for a grant opportunity with the New York State Office of Victim Services under the Victims of Crime Act (VOCA) Victim and Witness Assistance Grant Program from October 1, 2019 through September 30, 2022. This is a three year grant award with a possible one (1) two year renewal period. This grant provides an expanded opportunity for CVSVC to respond to the challenge of finding new solutions for serving victims of crime, developing innovative and comprehensive ways to meeting their complex needs, and for reaching underserved populations.

Back up material is provided for your review. Please do not hesitate to contact me if you have any questions or require additional information. Thank you for your consideration.

Respectfully Submitted,

Karen Ziegler  
Director

Cc: Dennis A. Feeney, Majority Leader  
Frank A. Mauriello, Minority Leader  
Kevin Cannizzaro, Esq., Majority Counsel  
Amis Zilgme, Esq. Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Contract Authorization for NYS OVS grant

Date: 2/1/2019
Submitted By: Karen Ziegler
Department: Crime Victim and Sexual Violence Center
Title: Director
Phone: 518-447-7100
Department Rep.
Attending Meeting: Karen Ziegler

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☒ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☐ Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
☐ Personnel Non-Individual
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
- [ ] Change Order/Contract Amendment
- [ ] Purchase (Equipment/Supplies)
- [ ] Lease (Equipment/Supplies)
- [ ] Requirements
- [ ] Professional Services
- [x] Grant

New Submission Date Deadline 4/3/2019

[ ] Settlement of a Claim
[ ] Release of Liability
[ ] Other: (state if not listed)

Contract Terms/Conditions:

Party (Name/address):
New York State Office of Victim Services
Alfred E. Smith Building, 2nd floor
80 South Swan Street
Albany, NY 12210

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: $2,000,000

Scope of Services:
Partial funding for 18 staff to provide direct services to victims of crime as well as operational costs from 10/1/2019 through 9/30/2022.

Bond Res. No.: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes [x] No [ ]
If Mandated Cite Authority: Click or tap here to enter text.
Is there a Fiscal Impact: Yes ☐ No ☒
Anticipated in Current Budget: Yes ☒ No ☐

County Budget Accounts:
Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.
Appropriation Account and Line: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)
Federal: Click or tap here to enter text.
State: Click or tap here to enter text.
County: Click or tap here to enter text.
Local: Click or tap here to enter text.

Term
Term: (Start and end date) 10/1/2019 - 9/30/2022
Length of Contract: 36 months

Impact on Pending Litigation
Yes ☐ No ☒
If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:
Resolution/Law Number: 151
Date of Adoption: 5/12/2014

Justification: (state briefly why legislative action is requested)
The NYS Office of Victim Services (OVS) is seeking proposals for the Victims of Crime Act (VOCA) Victim and Witness Assistance Grant Program. This grant provides financial support to community based organizations providing direct services to victims of crime. The VOCA Victim and Witness Assistance Grant Program is funded by the Federal Victims of Crime Act of 1984 which supports both victim compensation and victim assistance programs. This is a three year grant award with a possible one (1) two year renewal period. This grant provides an expanded opportunity for CVSVC to respond to the challenge of finding new solutions for serving victims of crime, developing innovative and comprehensive ways to meeting their complex needs, and for reaching underserved populations.
Hon. Andrew Joyce, Chairman
Albany County Legislature
112 State Street, Room 710
Albany, NY 12207

February 11, 2019

Dear Chairman Joyce:

I am submitting the enclosed Request for Legislative Action for approval on behalf of the
Albany County Crime Victim and Sexual Violence Center to contract with the City of Albany to
provide support for our annual Take back the Night March. We are asking the police department
to provide traffic and crowd control and the fire department to provide emergency medical
services.

Back up material is provided for your review. Please do not hesitate to contact me if you have
any questions or require additional information. Thank you for your consideration.

Respectfully Submitted,

Karen Ziegler
Director

Cc: Dennis A. Feeney, Majority Leader
Frank A. Mauriello, Minority Leader
Kevin Cannizzaro, Esq., Majority Counsel
Arnis Zilgme, Esq., Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Contract Authorization

Date: 2/1/2019
Submitted By: Karen Ziegler
Department: Crime Victim and Sexual Violence Center
Title: Director
Phone: 518-447-7100
Department Rep. Karen Ziegler
Attending Meeting: Karen Ziegler

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☒ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☐ Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
☐ Personnel Non-Individual
File #: TMP-0599, Version: 1

Is there a Fiscal Impact: Yes ☐ No ☒
Anticipated in Current Budget: Yes ☒ No ☐

County Budget Accounts:
Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: Click or tap here to enter text.
Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)
Federal: Click or tap here to enter text.
State: Click or tap here to enter text.
County: Click or tap here to enter text.
Local: Click or tap here to enter text.

Term
Term: (Start and end date) 4/17/2019
Length of Contract: 24 hours

Impact on Pending Litigation
If yes, explain: Yes ☐ No ☐
Click or tap here to enter text.

Previous requests for Identical or Similar Action:
Resolution/Law Number: 98
Date of Adoption: 3/12/2018

Justification: (state briefly why legislative action is requested)
This is the 38th Annual Take Back the Night March for CVSVC. This event is to encourage community mobilization. There is a rally on campus followed by a march. We are requesting that the Albany Police Department provides a mounted police escort for the one mile march through the City of Albany.
TAKE BACK the NIGHT

Rally and march against sexual violence

WEDNESDAY, APRIL 17, 2019
Washington Park Lake House
5:00pm - 8:00pm

Community TikTok, Live Performances, Survivor Speak Out, March & Candle Light Vigil

For more information please contact Rachel Wilson, (518) 447-7100 or rachel.wilson@albanycounty.ny.gov
January 7, 2019

Hon. Andrew Joyce, Chairman
Albany County Legislature
112 State St., Rm. 710
Albany, NY 12207

Dear Chairman Joyce:

Enclosed is a completed Request for Legislative Action and supporting documentation relative to a request to settle pending litigation which I am requesting be placed on the agenda for the next Law Committee meeting. As a tentative agreement to settle this litigation has been reached, subject to approval of the Legislature, I am requesting that the details of this proposed settlement remain confidential. Further, I will be requesting that the Law Committee meet in Executive Session to discuss the allegations of this lawsuit and the proposed terms of settlement.

Sincerely,

Daniel C. Lynch
Albany County Attorney

cc:  Dennis A. Feeney, Majority Leader
     Frank A. Mauriello, Minority Leader
     Kevin Cannizzaro, Majority Counsel
     Minority Counsel
REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):
Settlement Civil Matter

Date: 2/12/2019
Submitted By: Daniel Lynch
Department: Law
Title: County Attorney
Phone: 518-447-7048
Department Rep.
Attending Meeting: Daniel Lynch

Purpose of Request:

☐ Adopting of Local Law
☐ Amendment of Prior Legislation
☐ Approval/Adoption of Plan/Procedure
☐ Bond Approval
☐ Budget Amendment
☒ Contract Authorization
☐ Countywide Services
☐ Environmental Impact/SEQR
☐ Home Rule Request
☐ Property Conveyance
☐ Other: (state if not listed) Click or tap here to enter text.

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):
☐ Contractual
☐ Equipment
☐ Fringe
☐ Personnel
☐ Personnel Non-Individual
CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:
☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant

Choose an item.
Submission Date Deadline Click or tap to enter a date.
☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed)

Contract Terms/Conditions:

Party (Name/address):
See Handout

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee:
Scope of Services:
Click or tap here to enter text.

Bond Res. No.:
Date of Adoption:
Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service:
Yes ☐ No ☒
If Mandated Cite Authority:
Click or tap here to enter text.

Is there a Fiscal Impact:
Yes ☒ No ☐
Anticipated in Current Budget:
Yes ☒ No ☐

County Budget Accounts:
Revenue Account and Line: Click or tap here to enter text.
Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: CS9931
Appropriation Amount: $150,000

Source of Funding - (Percentages)
  Federal: Click or tap here to enter text.
  State: Click or tap here to enter text.
  County: 100%
  Local: Click or tap here to enter text.

Term
Term: (Start and end date) Click or tap here to enter text.
Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation
If yes, explain: Yes ☒ No ☐ Litigation is pending in state court

Previous requests for Identical or Similar Action:
Resolution/Law Number: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)
To settle a confidential lawsuit
Antonio Sturges
162 South Swan Street, Albany, NY 12202

PROFESSIONAL SUMMARY
Focused Funeral Assistant aiming to utilize 30 years of successful industry performance to bring value to the Albany County Coroners Office. Eager to fulfill a Coroner Investigator opportunity to apply skills in Funeral coordination, memorial material creation, Funeral home operations and previous experience with the Albany County, NY Coroners Office.

SKILLS
- Strong communication skills
- Interpersonal and written communication
- Methodology implementation
- Report writing
- Customer-oriented
- Extremely organized
- Home and hospital removals
- Crematory maintenance
- Dressing and casketing
- Funeral industry regulations knowledge
- Funeral planning
- Funeral service coordination

WORK HISTORY
ALBANY COUNTY CORONER ASSISTANT 01/2018 to 12/2018
Albany County Coroner Benjamin M. Sturges | Albany, NY
- Assisted Albany County Coroner in all job functions.
- Responded to the scene of death secured and assisted in securing the scene of death and protecting evidence.
- Conferred with police officers regarding conditions noted at scene of death.
- Reported any unusual and suspicious circumstances to the appropriate law enforcement agency.
- Removed dead bodies from the scene of death.
- Attended autopsies by the Medical Examiner.

SENIOR STAFF SUPPORT 01/2005 to CURRENT
Sturges Funeral & Cremation Service | Delmar, NY
- Support funeral director with all facets of funeral service coordination.
- Provide administrative support to funeral home staff.
- Promote funeral service merchandise such as caskets, urns, outer burial containers and flowers.
- Perform embalming procedures and updated case study reports.
- Complete cremation processing, including transferring remains to chosen urn.
- Close and secure caskets and led funeral corteges to churches and burial sites.
- Arrange transportation between sites for the remains, mourners, pallbearers and members of the clergy.
- Pick up the deceased at private homes, hospitals and county morgues.
- Communicate with insurance companies to secure death benefits for the
families of the deceased.

- Display the highest level of professionalism and sensitivity when dealing with grieving family members.

**GENERAL MANAGER**

*Benjamin M. Sturges Funeral Home | Troy, NY*

- Promoted funeral service merchandise such as caskets, urns, outer burial containers and flowers.
- Closed and secured caskets and led funeral corteges to churches and burial sites.
- Interviewed, hired and trained staff members.
- Maintained financial records such as payroll records for staff members.
- Communicated with insurance companies to secure death benefits for the families of the deceased.
- Performed embalming procedures and updated case study reports.
- Picked up the deceased at private homes, hospitals and county morgues.
- Acted as a liaison between hospitals, physicians, the county coroner, newspapers and members of the clergy.
- Arranged transportation between sites for the remains, mourners, pallbearers and members of the clergy.
- Displayed the highest level of professionalism and sensitivity when dealing with grieving family members.

**DME-DIABETIC SALES REPRESENTATIVE**

*Antonio Sturges Enterprises | Albany, NY*

- Supply hospitals and physicians with information on Diabetic products.
- Instruct diabetic patients users on how to use specific products.
- Perform product presentations and answer questions about diabetic related products.
- Maintain relationships with medical professionals and facilities.
- Act as the liaison between doctors and companies to sell diabetic products.

**EDUCATION**

**Bachelor of Science | Political Science**

*Northeastern University, Boston, MA*  
*1994*

**Associate of Arts | Paralegal Studies**

*Hesser College, Manchester, NH*  
*1991*
Hon. Andrew Joyce  
Chairman, Albany County Legislature  
Office of the Albany County Legislature  
112 State St., Rm. 700  
Albany, NY 12207  

Dear Chairman Joyce,

As you are aware, Mr. Sean Maguire resigned from the Albany County Planning Board in October leaving a vacancy on the board. The County Charter provides for eight members of the planning board: five voting members who are appointed by the County Legislature and three ex-officio (non-voting) members representing the Department of Public Works, County Comptroller, and Department of Management and Budget.

At the December 20th meeting of the Albany County Planning Board, our voting members unanimously agreed to recommend Mr. Brian Crawford of Berne, NY, for consideration by the Albany County Legislature to fill the existing vacancy. Mr. Crawford is an accomplished principal engineering technician who worked for Albany County Department of Public Works for 30 years and retired in 2017. He also serves as the Tax Assessor Chairman for the Town of Berne. The board believes Mr. Crawford's high level of expertise and dedication to Albany County make him an excellent candidate for membership on the planning board.

Mr. Crawford's resume and the list of current Albany County Planning Board members are attached for your reference. Please feel free to contact me by email (dominicr@ridaplcc.com) or cell phone (518-424-6595) if you have any questions. Thank you.

Sincerely,

Dominic Rigosu  
Acting Chairman, Albany County Planning Board

CC: Hon. Dennis Feeney, Majority Leader  
    Hon. Frank Mauriello, Minority Leader  
    George Penn, Director of Operations
Professional Summary
I am an accomplished Principal Engineering Technician with a background in drafting specializing in highway and bridge construction and the inspection process.

Skills
- Strong interpersonal skills
- Sound judgment
- Approachable
- Strategic thinker
- Skilled with analytical software
- Extensive AutoCAD knowledge
- OSHA Certified
- Knowledgeable in construction safety
- Scaffolding
- Fall Protection Plan (FPP)
- Highly skilled in 3D and 2D CAD

Work History
I graduated from the drafting apprentice program in 1976 and worked in gas turbine and steam turbine preparing drawings for different components of turbines and generators.

Principal Engineering Technician, Albany County – 30 years 12/1986 to 7/2017
I have worked in various aspects of highway design and maintenance including acting as a survey crew chief, construction inspection of highway and bridge projects with outside contractors, leading in house crews on drainage projects. In addition, my duties have included both manual and computer drafting projects, construction estimating, construction proposals and specifications and reduction and plotting of survey data.

Tax Assessor Chairman, Town of Berne – 25 Years (Elected) 01/1991 to Current
As chairman of the tax assessors I work with two fellow assessors following State and Albany County regulations to value taxable real property in the Town of Berne by inspecting annually every property in the Town. I process STAR exemptions and work with the board of assessment review.

Retired from Albany County 8/2017 to Current

Education
Associate of Applied Science: Management Engineering Technology 1976
Schenectady County Community College - Schenectady, NY
Surveying, Site Surveying & Construction Materials: Civil Engineering
Hudson Valley Community College - Troy, NY
Certificate: Assessor, State Certified 1994
New York State Assessors Training Program - Real Property

Personal Data
Married with two sons, Evan a graduate of Bishop Maginn High School and HVCC and Gregory who graduated from Bishop Maginn High School and now attending UAlbany.
Hobbies include hunting, trap shooting, sports and gardening, Life Member of the National Rifle Association.

References
Gerald O'Malley – Resident, Town of Berne – 518-872-0331
Peter Snyder – Deputy Commissioner, New York State Department of Transportation, Retired – 518-797-3261
2018 Albany County Planning Board Members

**Voting Members (as of October 29, 2018)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Municipality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yomika Bennett</td>
<td>Albany</td>
</tr>
<tr>
<td>Roland Graves, Vice Chair</td>
<td>Bethlehem</td>
</tr>
<tr>
<td>Dominic Rigosu, Acting Chair</td>
<td>Guilderland</td>
</tr>
<tr>
<td>Enzo Sofia</td>
<td>Colonie</td>
</tr>
<tr>
<td>Vacant</td>
<td></td>
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</table>

**Ex-Officio (non-voting) Members**

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lisa Ramundo</td>
<td>Public Works</td>
</tr>
<tr>
<td>Designee: Bill Anslow</td>
<td></td>
</tr>
<tr>
<td>Michael Conners</td>
<td>County Comptroller</td>
</tr>
<tr>
<td>Designee: Tim Garufi</td>
<td></td>
</tr>
<tr>
<td>Shawn Thelen</td>
<td>Management and Budget</td>
</tr>
<tr>
<td>Designee: David Reilly</td>
<td></td>
</tr>
</tbody>
</table>
Request for Allocation from Contingent Account (A.1990)
(Due in Chair's Office by close of business on 12/18/2023)

Name of Legislator making request:
Chris Higgins (5th District)

Name(s) of other Legislators supporting this request:
Sam Fein

Name(s) of other individuals or organizations supporting this request:
The Albany County Land Bank

Amount requested:
$250,000

If allocated, what will the money be used for?
General operations of the Land Bank, which include, maintenance of vacant lots and buildings, property insurance, and support for to create more opportunities for first-time homebuyers and families throughout Albany County.

Is this a new use of funds, a restoration of funding that was eliminated or an increase in funding to a program or service that is already receiving funding?
Increase in funding to a program or service that is already receiving funding.

Is this a one-time use of funds or will this use require ongoing funding? (Priority will be given to one-time uses of funds as money in the Contingent account is non-recurring)
One time use of funds.

Number and name of account to which funds will be transferred (e.g., A6772 44455-Social Transportation Program):
A3650 44064 Regional Land Bank

Department responsible for this account:
Department of Management & Budget

Does the Head of this Department support this request?
The Head of the Department of Management & Budget has not been consulted. The Executive Director of the Albany County Land Bank has spoken to members of the Legislature on multiple occasions about the lack of available funding needed to fulfill mission to demolish or rehabilitate the large number of vacant and abandoned buildings with limited resources. The sponsor has spoken with Executive Director Adam Zaranko who has affirmed the funding is needed and will be put to maximum use.
Request for Allocation from Contingent Account (A.1990)

(Due in Chair’s Office by close of business on [missing date])

Name of Legislator making request:
Sam Fein

Name(s) of other Legislators supporting this request:
Mert Simpson, Lynne Lekakis, Chris Higgins, Lucille McKnight, Bill Clay, Gary Domalewicz, Doug Bullock, Norma Chapman, Alison McLean Lane, Wanda Willingham, Vicky Plotsky, Bill Reinhardt

Name(s) of other individuals or organizations supporting this request:
Trinity Alliance of the Capital Region

Amount requested:
$46,500

If allocated, what will the money be used for?
The money will be used primarily to fund salary and benefits, as well as items such as assistance to individuals, program supplies, mileage, and staff phone usage. The continuance of the jail re-entry program is dependent on this funding. Without the funding being restored, Trinity Alliance will be forced to terminate an employee and will also be at risk of losing funding provided by NYS Division of Criminal Justice Services (DCJS).

Is this a new use of funds, a restoration of funding that was eliminated or an increase in funding to a program or service that is already receiving funding?
Restoration of funding that was eliminated.

Is this a one-time use of funds or will this use require ongoing funding? (Priority will be given to one-time uses of funds as money in the Contingent account is non-recurring)
This is a one-time use of funding. If the Sheriff’s Office and Trinity Alliance decide to continue the program in future years, funding would be requested during the budget process as part of the Sheriff’s Office budget, as has occurred in previous years.

Number and name of account to which funds will be transferred (e.g., A6772 44455-Social Transportation Program):
A3150 44498 Jail Transition Program

Department responsible for this account:
Sheriff’s Office

Does the Head of this Department support this request?
Yes
Request for Allocation from Contingent Account (A.1990)
(2Due in Chair’s Office by close of business on **February 8, 2019**)

**Name of Legislator making request:**
Merton Simpson

**Name(s) of other Legislators supporting this request:**
Sam Fein, Chris Higgins

**Name(s) of other individuals or organizations supporting this request:**

**Amount requested:**
$100,000

If allocated, what will the money be used for?
The use of this type of funding would allow the Department of Recreation to offer youth recreation programs in the City of Albany (and potentially other municipalities where they are not currently offered by the County), such as karate, lacrosse and basketball, as it does in neighboring municipalities.

Is this a new use of funds, a restoration of funding that was eliminated or an increase in funding to a program or service that is already receiving funding?
Increase in funding to a program or service that is already receiving funding. In the 2018 budget, the Legislature set aside $100,000 in funding in the Contingent Account to be used for expanding recreation programs to the City of Albany. The Legislature did not transfer money out of Contingent Account or follow-up on this issue during 2018.

Is this a one-time use of funds or will this use require ongoing funding? (Priority will be given to one-time uses of funds as money in the Contingent account is non-recurring)
This is a one-time use of funds. Funding to expand youth programming to the City of Albany (and potentially other municipalities) would be a good opportunity to determine if funding should be allocated in the 2020 budget cycle depending on the outcome of a potential 2019 youth program.

**Number and name of account to which funds will be transferred (e.g., A6772 44455-Social Transportation Program):**
A 7410 44449 Youth Recreation Programming

**Department responsible for this account:**
Department of Recreation

**Does the Head of this Department support this request?**
Contingent upon discussion. During budget hearings for 2018 budget, Commissioner John D’Antonio stated that expanding youth recreation programs to the City of Albany would require additional funding.
Request for Allocation from Contingent Account (A.1990)
( Due in Chair’s Office by close of business on February 3, 2011)

Name of Legislator making this request: A. Joyce

Name(s) of other Legislators supporting this request:

Name(s) of other individuals or organizations supporting this request: County Executive Office

Amount requested: $9,491

If allocated, what will the money be used for? To purchase biodegradable office trash bags, instead of the traditional bags. Doing so will help avoid approximately 400,000 traditional office bags from being disposed of in a landfill

Is this a new use of funds, a restoration of funding that was eliminated or an increase in funding to a program or service that is already receiving funding? New use of funds

Is this a one-time use of funds or will this use require ongoing funding? (Priority will be given to one-time uses of funds as money in the Contingent account is non-recurring) This will require ongoing funding only if the biodegradable office trash bags work as well as traditional office trash bags

Number and name of account to which funds will be transferred (e.g., A.6772 44455- Social Transportation Program): A1620 4 4024 Housekeeping Supplies

Department responsible for this account:
DGS

Does the Head of this Department support this request? Yes
Request for Allocation from Contingent Account (A.1990)
(Due in Chair's Office by close of business on 10/22/99)

Name of Legislator making this request: Charles Dawson

Name(s) of other Legislators supporting this request: Cunningham, Flusty, Keinhardt

Name(s) of other individuals or organizations supporting this request: Delmar-Bethlehem EMS, Friends of the Rail Trail

Amount requested: $80,000

If allocated, what will the money be used for?

Special Ambulance for the Albany-Helderberg Rail Trail
Off Road Vehicle -- see specs attached

Is this a new use of funds, a restoration of funding that was eliminated or an increase in funding to a program or service that is already receiving funding? One-time acquisition costs assistance

Is this a one-time use of funds or will this use require ongoing funding? (Priority will be given to one-time uses of funds as money in the Contingent account is non-recurring)

One-time

Number and name of account to which funds will be transferred (e.g., A.6772.44455- Social Transportation Program):

Probably Sheriff's Office (Sheriff EMS personnel share building where ambulance will be housed)

Department responsible for this account: Sheriff

Does the Head of this Department support this request? Yes
Request for Allocation from Contingent Account (A.1990)
(Due in Chair's Office by close of business on 8/31/2000)

Name of Legislator making this request:

JOSEPH E. O'BRIEN

Name(s) of other Legislators supporting this request:

MARK R. BENDT, BRIAN D. F.

Name(s) of other individuals or organizations supporting this request:

Amount requested: $74,344.20

If allocated, what will the money be used for?

SEE ATTACHED

Is this a new use of funds, a restoration of funding that was eliminated or an increase in funding to a program or service that is already receiving funding?

YES. CLOVER HILL PRE SCHOOL & THE CENTER FOR DISABILITY SERVICES IS ALREADY FUNDED BY ALBANY COUNTY.

Is this a one-time use of funds or will this use require ongoing funding? (Priority will be given to one-time uses of funds as money in the Contingent account is non-recurring)

ONE-TIME USE

Number and name of account to which funds will be transferred (e.g., A.6772 44455- Social Transportation Program):

A.2460 4 404.6 FEE FOR SERVICES

Department responsible for this account:

CTE

Does the Head of this Department support this request? YES (VIA COUNTY EXECUTIVE OFFICE)
The MOVE equipment listed below would highly benefit the students in the Clover Patch preschool program. This MOVE equipment is durable and is able to be adapted so it can be used for multiple students over the years. This equipment helps the students to be active participants throughout the school day. When using these pieces of equipment students are provided with opportunities to work on goals of ambulation, standing, weight bearing; improved head and trunk control; increased overall strength; and increased range of motion.

Small HTS Z110 $2725.00
5 Compass Chairs $400.00 each = $2,000.00
2 Small Pacers $3505.00 each = $7,010.00
3 Small Standard Base $3745.00 each = $11,235.00
Small Hi/Lo Base $4845.00
Small Mobile Stander $4119.00
2 Medium Mobile Stander $4730.00 each = $9460.00
2 Medium New Pacers $4,335.00 each = $8670.00
4 Small pacer trunk prompts $510.00 each = $2,040.00

Total $52,104

The items and curriculum programs below are all items that will help students progress in their learning. There are technology items which will help increase students engagement in instruction. Some of the technology items specifically will assist students with visual impairments to access instruction. Other technology items will increase the students’ ability to communicate throughout the school day.

1 Smart Board $5,000.00
2 Classroom computer $1,000.00 each = $2,000.00
2 Small iPad $500.00 each = $1,000.00
5 Large iPad $900.00 each = $4,500.00
2 Connectors for iPad to Smart Boards $50 each = $100.00
7 Touch Chat applications $150.00 each = $1,050.00
Big Bang Bundle Application $35.00
(2) Pro-lo-quo To Go application $250.00 each = $500.00
Board Maker Professional subscription $540.00
(2) Board Maker Personal subscription $270.00 each = $540.00
(2) Unique Learning subscriptions $530.00 each = $1,060.00
(2) Symbols Stix subscriptions $87.10 each = $165.20

2 Big Step by Step with levels $195.00 each = $390.00
2 Little Step by Step with levels $195.00 each = $390.00
8 Big Mack switches $65.00 each = $520.00
<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
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<tbody>
<tr>
<td>Sensory (i.e. sensory swing frame, YogiBo seating, weighted vests, etc.)</td>
<td>$3,000.00</td>
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<tr>
<td>Educational materials</td>
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<tr>
<td>Adapted Toys</td>
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<tr>
<td>Total</td>
<td>$22,790.20</td>
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<tr>
<td>Overall Total</td>
<td>$74,894.20</td>
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Request for Allocation from Contingent Account (A.1990)
(Due in Chair's Office by close of business on Th, April 18, 2013)

Name of Legislator making this request:
Sean Ward

Name(s) of other Legislators supporting this request:
Bob Beston

Name(s) of other individuals or organizations supporting this request:
Village of Green Island Mayor Ellen M. McNulty-Ryan, Green Island Senior Citizens Executive Director Jill Alix,
Albany County Commissioner of Aging Deb Rittano

Amount requested:  $10,000

If allocated, what will the money be used for?
Funds will be expended to replace the aging furnace at the Green Island Community Center, which is the full time home of the Green Island Senior Citizens and an Albany County Department of Aging Congregate Meal Site. This site serves approximately 4,000 meals annually to a vulnerable senior population, most residing in the northern section of Albany County.

Is this a new use of funds, a restoration of funding that was eliminated or an increase in funding to a program or service that is already receiving funding?
This is a new one time use of funds.

Is this a one-time use of funds or will this use require ongoing funding? (Priority will be given to one-time uses of funds as money in the Contingent account is non-recurring)
This would be a non recurring use of funding to replace an old inefficient furnace in need of replacing.

Number and name of account to which funds will be transferred (e.g., A.6772 44455- Social Transportation Program):
Legislature A1010 44049 Special Programs or Aging A6772 44046 Fees for Services

Department responsible for this account:
Albany County Legislature or Department of Aging

Does the Head of this Department support this request? Commissioner Rittano does support this project.
Name of Legislator making this request:  
Paul Burgdorff

Names(s) of other Legislators supporting this request:  
Joe O’Brien, Frank Mauriello, and Dave Mayo

Amount requested:  $50,000

If allocated, what will the money be used for?

Since 1984, Colonie Senior Service Centers (CSSC) has been providing continuous transportation services to seniors in the Town of Colonie. One of the most important aspects of successful aging in staying active and social even when one can no longer drive. In 2018, CSSC’s Transportation Services provided over 23,000 rides to seniors, primarily those 60 years of age or older with service hours are Monday through Friday between 8 am and 4 pm. The number of registrants and the number of ride requests is constantly increasing. We are averaging about 100 rides a day and anticipate approximately 25,000 rides provided this year.

Based on age, excessive mileage and maintenance upkeep, CSSC will be forced to retire vehicles in 2019 and we will need to purchase replacement vehicles in order to continue to transport seniors at our current capacity. The new vehicles will allow us to continue to provide safe, dependable transportation service to those who depend on us for medical appointments, pharmacy visits, weekly grocery shopping trips and social activities such as attending a congregate lunch program. CSSC is anticipating receiving two vehicles through a successful 2017 5310 grant application sometime this year. Working through NYS DOT, this grant requires a 80% / 20% match.

The money requested would go towards the purchase of one new vehicle as well as assisting with CSSC’s required match in order to obtain the two vehicles awarded in the 5310 grant. If this request granted, CSSC could have three much needed new vehicles added to its fleet.

Is this a one-time use of funds or will this use require ongoing funding? (Priority will be given to one-time uses of funds as money in the Contingent account is non-recurring)

One-time use

Number and name of account to which funds will be transferred (e.g., A.6772 44455- Social Transportation Program):

A. 6772 44455- USES FOR SERVICES

Department responsible for this account:

Alain

Does the Head of this Department support this request?  

LOCAL LAW NO. 0 FOR 2018

A LOCAL LAW OF THE COUNTY OF ALBANY, NEW YORK, AMENDING SECTION 207 OF THE ALBANY COUNTY CHARTER AND LOCAL LAW NO. 8 FOR 1993 AS SUBSEQUENTLY AMENDED RELATING TO COMMISSIONS ON REAPPORTIONMENT

Introduced: 05/31/18

By: Ms. Cunningham, Mr. Crouse, Ms. Willingham, Messrs. A. Joyce, Clehahan, Domalewicz, Fein, Higgins, Ms. Lekakis, Mr. O’Brien, Ms. Plotsky, Messrs. Simpson, Mayo, Mauriello, Reinhardt, Ms. McClean-Lane, Messrs. Bullock and R. Joyce

Statement of legislative findings and intent.

The Albany County Legislature hereby embraces the creation of the Albany County Commission on Reapportionment, (the Commission) which will facilitate a non-partisan, independent, inclusive and participatory redistricting process for the County’s legislative redistricting following the next federal census in 2020, and thereafter. Pursuant to law, the County’s legislative districts must be adjusted in accordance with the relative population growth and shifts as indicated in the census to ensure that fair representation for each resident is maintained.

The legislative redistricting process shall be conducted by this independent Commission, which shall be adequately funded to carry out its responsibilities and to hire independent, expert professional staff. Further, the Legislature wishes to tap into the expertise of the newly established Albany County Legislature Black Caucus (adopted as Resolution 123 by unanimous vote of the Albany County Legislature) to facilitate the creation of the Majority Minority District (MMD) Reapportionment Subcommittee, with the purpose of assisting the Commission in providing a laser focus to ensure the fair representation of Albany County minority communities in all aspects of the reapportionment process. It is the intent of the Legislature that the Commission and the MMD Reapportionment Subcommittee shall work collaboratively, in tandem, with a high level of communication and interaction between the two bodies.

The Commission’s members shall not include elected officials or party officers, family members, legislative staff, or candidates for elective office. The Commission shall be transparent, accountable and function independently, without the undue and improper influence of sitting elected officials and their representatives. The Commission’s work shall be accomplished through a professional process that invites experts in the areas of redistricting, law, county geography and other important elements that are key to securing a credible, responsive, and accountable redistricting process and outcome.

Pursuant to sections 10 and 33 of the Municipal Home Rule Law and section 2701 of the Albany County Charter:

Be it enacted by the County Legislature as follows:
Section 1. The Albany County Charter is hereby amended by deleting the existing Section 207 and adding a new Section 207 to read as follows:

Section 207. Commission on Reapportionment.

A. A Commission on Reapportionment (identified in this local law as “the Commission”) shall be established to make recommendations to the County Legislature on whether and how the County Legislature should be reapportioned when required. Triggering events include but may not be limited to: 1) upon publication of the results of the federal decennial census for Albany County, 2) upon publication of census tracts and block statistics based upon any federal or special population census taken pursuant to Section 20 of General Municipal Law, and held not more than once every five (5) years, or (3) any annexation which has the effect of increasing or decreasing the population of any legislative district by more than 10 percent. This process shall occur subsequent to the federal and state reapportionment process, to the extent practicable.

B. Commission Composition

1. The Commission shall consist of nine (9) members who are County residents, registered voters in New York State, but shall not have been in the last four years immediately preceding the creation of the Commission: 1.) a publicly elected official, which shall mean any individual elected to local, county, state or federal office, excluding school board members and library trustees, but including those elected as members of political parties; 2.) a state employee who serves as a political appointee or legislative employee.; 3) a political party chairperson or officer. Further exclusions of individuals that may not serve on the Commission are fully identified in Section F.

2. The Commission Members shall be selected to reflect the diversity of the residents of this county with regard to race, ethnicity, gender, language, and geographic residence (including representative of rural/small communities). In selecting Commission Members, the Legislature shall consult with organizations devoted to protecting the voting rights of minority and other populations. These requirements will ensure that the Commission’s members are both independent, representative of the County's diverse communities, and sensitive to the critical importance to voters of fair and proper district lines.

C. Majority Minority District Reapportionment Subcommittee – Intent and Functions

1. To ensure that the interests of minority districts are adequately and appropriately incorporated into a redistricting proposal, a special Majority Minority District (MMD) Reapportionment Subcommittee (identified further as the MMD Subcommittee) will be also established that will work collaboratively and in tandem with the Commission. The MMD Subcommittee will be created as a vital component of the Commission’s work and efforts and shall make recommendations to the Commission regarding the configuration of minority districts, with the goal of
protecting voting rights of minority residents and ensuring adequate electoral representation of minority residents residing in MMDs. The unique focus of the MMD Subcommittee shall be to ensure the representation of Albany County minority communities in all aspects of the reapportionment process.

2. The MMD Subcommittee shall have the authority and funds to contract its own outside legal/reapportionment consultant.

3. The intent of the work of the MMD Subcommittee shall be to fully examine the issues unique to the MMD communities and their residents and shall be presented for inclusion into the final report of the Commission.

D. MMD Reapportionment Subcommittee Composition, Appointment Process and Function

1. The MMD Subcommittee shall be appointed by the Albany County Legislature Black Caucus (LBC) and shall consist of seven (7) members who are representative of the minority communities represented by the LBC. MMD Subcommittee Members shall be County residents, registered voters in New York State, but shall not have been in the last four years preceding the creation of the MMD Subcommittee: 1.) a publicly elected official, which shall mean any individual elected to local, county, state or federal office, excluding school board members and library trustees, but including those elected as members of political parties; 2.) a state employee who serves as a political appointee or legislative employee; 3.) a political party chairperson or officer. Further exclusions of individuals that may not serve on the MMD Subcommittee are fully identified in Section F.

2. Appointments to the MMD Subcommittee may be made in the year of the census, after extensive, repeated solicitation by the Albany County Legislature of potential appointees that are knowledgeable, capable, interested and experienced in the reapportionment field. The Albany County Legislature shall use all communication means necessary to educate the public on the Commission and MMD Subcommittee process and need for appointees.

3. After a County-wide solicitation of potential appointees, the Chair of the LBC shall appoint two (2) representatives who shall serve on the MMD Subcommittee and subsequently, the additional Members of the MMD Subcommittee shall be selected by a majority vote of the Albany County Legislature Black Caucus. In the event that the LBC members cannot agree on any individual member of the MMD Subcommittee, the Chair of the LBC shall make the final selection of the potential candidates under discussion. The MMD Subcommittee shall select its own leadership by voting on a Chairperson at its first meeting.

4. The MMD Subcommittee will be required to hold its own hearings and public forums to collect and consider the inputs from impacted communities, as well as the county communities at large. The subsequent work products of the MMD subcommittee, including the drawing of the maps of the MMD districts, shall be presented for inclusion into the final report of the Commission. The Commission shall, upon the receipt of the report from the MMD, reflect its consideration and prepare a written report to the Legislature that documents its consideration of the recommendations of the MMD Subcommittee prior to the submission of the final report to the Legislature.
for vote. Should the Commission elect to exclude, add to or modify recommendations of the MMD Subcommittee's report and work product, it shall provide a detailed justification and rationale regarding its decision.

E. Commission Membership and Process

1. In the year of the census, the Albany County Legislature shall solicit interest widely throughout Albany County for knowledgeable, interested and capable individuals to serve on the Commission. To encourage interest of the widest possible pool of qualified and knowledgeable individuals, the County Legislature shall regularly use all communication means necessary to solicit interest in serving on the Commission and the MMD Reapportionment Subcommittee. Interested individuals shall provide to a designated County email or mailing address information that shall include but not be limited to: resume, credentials, any relevant expertise in the reapportionment and legal fields, community background and experience and other important information regarding the individual's capacity and interest in serving on the Commission.

2. It is the intent of the Legislature that because the Commission appointees will reflect a cross section of backgrounds, expertise, interests and credentials, a broad solicitation of diverse individuals is required. The members of the Commission shall reflect the diversity of the residents of Albany County with respect to socio-economic status, race, ethnicity, gender, sexual orientation, and geographic residence, including the representation of rural and small communities.

F. Commission Independence

1. To further ensure that the Commission's Members are independent, the following individuals shall be removed from the applicant pool:

   a. Within the four years immediately preceding the creation of the Commission, or any subsequent Commissions under this law, or through their term of service on the Commission, neither the applicant, nor a member of his or her immediate family, may have done any of the following:

      (i) Been appointed to, elected to, or have been a candidate for federal, state, county, or local office, excluding school board members, library trustees, and fire commissioners;

      (ii) Served as an officer, employee, or paid consultant of a political party or of the campaign committee of a candidate for elective federal, state, county, or local office;

      (iii) Served as a paid Congressional-Federal or State political appointee or employee of the State Legislature;

      (iv) Been an Albany County employee, or paid consultant;

      (v) Serve as a registered lobbyist in the State of New York.

   b. Staff and consultants to, persons under a contract with, or any person with an immediate family relationship with any county or publicly elected official, excluding
school board members, library trustees and fire commissioners, are not eligible to serve as commission members. As used in this subdivision, a member of a person's "immediate family" is one with whom the person has a bona fide relationship established through blood or legal relation, including spouse, parents, children, siblings, and in-laws.

G. Timing of Commission Appointments

1. All appointments to the Commission or the MMD Reapportionment Subcommittee may be made in the year of the census, after extensive solicitation of appointees that are expert, knowledgeable and experienced in the reapportionment field. Initial appointments to the Commission from the pool of interested parties gathered in this manner shall represent various geographic areas of the County and must be made by the time the census data becomes available. The 9 (nine) Appointments shall be made to the Commission in the following manner: The Majority Leader, Minority Leader, Chairperson of the Legislature and the Chairperson of the Legislative Black Caucus shall each make one (1) appointment to the Commission (comporting with the other exclusions contained in this local law). Three (3) individuals shall make the remaining five (5) appointments to the Commission (also comporting with other exclusions of this local law). Three (3) members shall be appointed by the Chairperson of the Albany County Legislature, three (3) shall be appointed by the Majority Leader of the County Legislature and three members (3) by the Minority Leader of the County Legislature. The Commission shall select its own leadership by voting on a Chairperson at its first meeting, from among the 5 (five) independently selected Commission Members.

2. Vacancies in the membership of the Commission shall be filled within thirty days (30) by a manner determined by the remaining Commission Members, in the manner provided for in the original appointments.

H. Request for Proposal Process

1. The Commission and MMD Subcommittee shall expeditiously issue two (2) Requests for Proposals (RFPs) for map drawing services, one for Majority Minority districts (MMD) and the other for the entirety of Albany County. Together with the Albany County Division of Purchasing, the Committee and Subcommittee shall be empowered to create and draft RFPs consistent with Article 13 of the Albany County Charter, the Albany County Procurement Policy, and any relevant state or federal laws. Both RFPs (the Commission and the MMD Subcommittee) shall be evaluated based on their ability to produce maps and supporting data, and engage in publicly informed and participatory processes that eventually produce successfully drawn maps that reflect the goals identified in Section 1. Out of the RFP Process, the selected entities shall provide map drawing expert resources, modeling of districts, data-driven analysis that shall assist the Commission and MMD Subcommittee in fully understanding and determining the impact...
of the redistricting process.

I. Compliance and Adherence with Appropriate Federal Laws and Equal Representation Goals

1. The Commission, the MMD Reapportionment Subcommittee, staff and the consultant(s) hired under the RFP shall comply with the requirements of 52 U.S.C. 1001 (Section 2 of the Voting Rights Act of 1965) and in all subsequent relevant statutes and case law.

2. The Commission and the MMD Subcommittee shall be guided by the goal of equal and fair representation of all people in Albany County, consistent with established state and federal law as interpreted by courts of appropriate jurisdiction. Factors to consider include, but shall not be limited to:

   a. whether such lines would result in the denial or abridgment of racial or language minority voting rights, and districts shall not be drawn to have the purpose of, nor shall they result in, the denial or abridgment of such rights. Districts shall be drawn so that, based on the totality of the circumstances, racial or minority language groups do not have less opportunity to participate in the political process than other members of the electorate and to elect representatives of their choice;
   
   b. shall minimize population variance, to the extent practicable, among districts in accordance with federal law, but in no instance shall a district's population exceed 105% or be less than 95% of the ideal district size;
   
   c. each district shall consist of contiguous territory;
   
   d. each district shall be as compact in form as practicable;
   
   e. districts shall be consistent with existing municipal and rural boundaries, and neighborhoods within Albany County; and balance and reasonableness for the diversity of citizens residing in all parts of the County;
   
   f. the places of residences of incumbents or candidates shall not be identified or considered;
   
   g. party registration shall be excluded from the initial phase of the mapping process but may be used to test maps for compliance with the above goals with party voting history and participation included.

J. Commission and MMD Subcommittee Appropriations, Staffing and Operations:

1. In the fiscal year prior to the establishment of the Commission, the Legislature shall appropriate funding for all aspects of the activities of the Commission and the MMD Subcommittee. These funds shall provide for all expenses of the work of the Commission and MMD Subcommittee, funds for the compensation of consultants, members and staff, as well as funding for any duties that the County Legislature shall deem necessary to facilitate the performance of the Commission and MMD Subcommittee's duties identified in this Local Law. The Commission and MMD Subcommittee shall establish clear criteria for the securing and overseeing of staff and consultants, communications
protocols and processes, and a code of conduct. The Commission shall apply the conflicts of interest listed in subdivision F to the hiring of staff to the extent practicable. The Commission shall require that legal counsel hired by the Commission have demonstrated and extensive experience and expertise in reapportionment processes, and in the implementation and enforcement of the federal Voting Rights Act of 1965 (42 U.S.C. Sec. 1971 et seq.).

2. Commission and MMD Subcommittee members and staff shall exercise the highest standards of conduct, and disclose to Commission/MMD Subcommittee colleagues substantive communications with elected officials, staff and other public officials that occur outside public hearings or meetings of the Commission and MMD Subcommittee.

3. The Commission and the MMD Subcommittee will work in a process that allows for timely input from the County Legislature and its members and allows for the maximum amount of public participation, engagement, and comment. The Commission and the MMD Subcommittee will be committed to full transparency and accountability including the timely posting of its meetings, agendas, minutes, data and any relevant reports or information that is included in the body of work of the Commission and the MMD Reapportionment Subcommittee.

4. All meeting minutes, notes, documents, reports, and any work product of the Commission and MMD Subcommittee shall be maintained and preserved as official documents of the reapportionment process and housed by the Office of the Clerk of the Albany County Legislature. The Commission and MMD Subcommittee will work collaboratively and closely together, with full discussion and dialogue taking place between the two structures. The Commission and MMD shall have the authority to solicit information and expert opinion from government agencies and staff as they see fit.

K. Commission and MMD Reapportionment Subcommittee Hearings/Public Comment Periods and Public Access to Information:

1. During the preparation of the redistricting plan, the Commission working closely and in collaboration with the MMD Subcommittee shall conduct not less than four (4) public hearings throughout the County. The MMD Subcommittee shall be empowered to hold its own public hearings for additional community input. These public hearings shall be publicized widely, with ample notice to ensure the maximum level of citizen participation and engagement. The purpose of the public hearing process is to promote a high level of understanding of the process and its implications to the public, to provide expert presentations and access to Commission and MMD leaders, staff and consultants, allow for ample public comment, and to communicate the process of the reapportionment process to the public. All public hearings should be publicized and information about the meetings should be widely disseminated. The Albany County website shall be the venue for the collection of all information regarding the work of the Commission and MMD Subcommittee.

2. The Commission and the MMD Subcommittee shall make available to the public, on the Albany County website and through electronic media efforts, any draft redistricting plans and concepts, relevant data, and related information. Such plans, data, and information shall be in a form that allows and facilitates their use by the
public to review, analyze, and comment upon such plans. The Commission can adjust its redistricting outline based on input received from the public. Prior to the final redistricting plan being presented for adoption by the Legislature, the Commission shall conduct a final public hearing to ensure that the residents of Albany County have ample opportunity to understand, provide comment and feedback on the final report. The Commission shall report the findings of all public hearings in a written report to the legislature upon submission of the final redistricting plan.

L. Final Report of the Commission

1. The Commission shall submit its final report in the form of a proposed local law to the Clerk of the County Legislature within thirty (30) days after the final report is completed for distribution to the members of the Legislature.

2. No later than 30 days after receiving the final report, the Chairperson of the County Legislature shall submit to the County Legislature, the Commission’s final reapportionment report in the form of a proposed local law, for consideration by the full Legislature. No later than sixty (60) days after its submission by the Chairperson, the proposed local law shall be forwarded to the full legislature for consideration. The County Legislature may then by a majority vote of the whole number of its members choose to adopt such proposed local law on legislative districts. If such proposed local law is not adopted, the Commission shall be empowered to continue its work through subsequent amendment processes to ensure legislative passage and enactment in a timely manner. The Commission shall submit a revised report to the Legislature no later than sixty (60) days after the proposed local law has been returned to it. The Legislature may provide feedback and recommendations to the Commission in order to assist the Commission in providing an updated reapportionment report. The revised report shall be submitted and subsequently introduced in accordance with the requirements of Section L (1) and (2) respectively. The County Legislature shall consider the recommendations included in any updated report. The Commission and its MMD Subcommittee shall be discharged upon the successful conclusion of the Albany County Reapportionment process.

M. Effective Date

1. This Local Law shall take effective immediately upon filing with the Secretary of State. Pursuant to Municipal Home Rule Law Section 33, this Local Law, amending the present Albany County Charter shall not become operative unless and until this Local Law is approved by the duly qualified voters of Albany County in the manner prescribed by law at the general election of November 5, 2019.